

# **EXHIBIT 19**

## **DECLARATION OF RUFUS JENKINS**

### **Part 1: Declaration – Attachment H, pages 1 – 148**

**DECLARATION OF RUFUS JENKINS  
PURSUANT TO 28 U.S.C. §1746**

I, Rufus L. M. Jenkins, have personal knowledge of the facts and matters discussed in this declaration and, if called as a witness, could and would testify as follows:

1. I am a citizen of the United States and over the age of eighteen (18) years old. I am employed by the Federal Trade Commission (“FTC”) as an investigator in the Bureau of Consumer Protection’s Division of Financial Practices. My office address is 600 Pennsylvania Avenue, NW, Mail Stop CC-10232, Washington, DC 20580.
2. I have worked with the FTC since April 2019. Previously, I worked for eight years in a forensics practice at one of the Big Four public accounting firms. I earned my Master of Accountancy and Master of Business Administration from Mercer University.
3. At the FTC, my responsibilities include investigating parties suspected of engaging in unfair or deceptive acts or practices in violation of the FTC Act and any other laws or rules enforced by the FTC. In the normal course of carrying out my investigative responsibilities, I regularly use Internet search engines, electronic databases, spreadsheet software, and a variety of other software-based investigative and organizational tools. I regularly review a variety of records, including bank data, website registration data, and telecommunications records, engaging in analysis for indicators of fraudulent activity.
4. I am a licensed Certified Public Accountant (“CPA”). To become a licensed CPA, I passed the Uniform CPA Examination®. The CPA Exam consists of four, four-hour sections: Auditing and Attestation, Business Environment and Concepts, Financial Accounting and Reporting, and Regulation. Examples of content areas within exam sections include Performing Further Procedures and Obtaining Evidence, Economic Concepts and Analysis,

1 Financial Statement Accounts, and Business Law. Further, I had to meet rigorous  
2 requirements concerning education, experience, and ethics. To maintain my permit to  
3 practice, I must complete no less than eighty hours of acceptable continuing professional  
4 education (“CPE”) during the two-year period preceding the date my license expires.

5 Representative subject areas of acceptable continuing education credits include Accounting  
6 and auditing, Computer Science, Statistics, Economics, and Business Law.

- 7
- 8 5. I am also a Certified Fraud Examiner (“CFE”). To become a Certified Fraud Examiner, I had  
9 to pass an exam which tested four subject areas: (1) fraud prevention and deterrence; (2)  
10 fraudulent financial transactions; (3) fraud investigations; and (4) legal elements of fraud. To  
11 maintain my CFE Credential, I am required to earn at least twenty hours of CPE every 12-  
12 month period. At least ten of these hours must relate directly to the detection and deterrence  
13 of fraud and two hours must relate directly to ethics. The other eight are left to individual  
14 choice between the two preceding fields of study and the exam subject areas.
- 15
- 16 6. As part of my duties at the FTC, I have been assigned to work on the FTC’s investigation of  
17 Lead Express, Inc. (“Lead Express”); Camel Coins, Inc. (“Camel Coins”); Sea Mirror, Inc.  
18 (“Sea Mirror”); Naito, Corp.; Kotobuki Marketing, Inc. (“Kotobuki Marketing”); Ebisu  
19 Marketing, Corp. (“Ebisu Marketing”); Hotei Marketing, Inc. (“Hotei Marketing”); Daikoku  
20 Marketing, Inc. (“Daikoku Marketing”), (collectively, the “Corporate Defendants”); La Posta  
21 Tribal Lending Enterprise, also doing business as Harvest Moon Financial, Harvest Moon  
22 Loans, Gentle Breeze, Gentle Breeze Online, and Green Stream Lending (the “Tribal  
23 Defendant”); Takehisa Naito; and Keishi Ikeda. Throughout this declaration, I will refer to  
24 the subjects of the FTC’s investigation collectively as “Defendants.”  
25  
26

- 1 7. During the course of this investigation, I have acquired personal knowledge and information  
2 about the facts stated here, and if called, would testify to the same. My conclusions are based  
3 on my investigation of Defendants, which included my review of consumer complaints about  
4 the Defendants' business practices and review of documents obtained by the FTC, including,  
5 but not limited to, corporate records, website and domain registration documents, telephone  
6 records, and financial records.
- 7  
8 8. During the investigation, the FTC obtained records and information from a number of  
9 sources through compulsory process, by issuing a Civil Investigative Demand ("CID"), and  
10 other means. The records and information include, but are not limited to, consumer  
11 complaints, corporate filings, website and domain registration documents, telephone records,  
12 and financial records. Throughout this declaration, I refer to Defendants' various financial  
13 accounts using the following protocol: an abbreviated trade name (in whose name the  
14 particular account is held), bank initials, and the last four digits of the account number.
- 15  
16 9. One of my duties is to serve as document custodian for the FTC in this investigation. As the  
17 custodian of documents and information collected in the course of this investigation, I  
18 maintain all such evidence in my custody and control, either on a secure FTC server or in a  
19 locked filing cabinet in my office. Personal information, such as social security numbers and  
20 account numbers, have been redacted from the attachments to this declaration in order to  
21 protect the privacy of consumers and individuals associated with the Defendants. Copies of  
22 any documents referred to in my declaration are available without information obscured for  
23 viewing upon request. Below, I describe those documents and information the FTC gathered  
24 during this investigation, and, in some instances, present my analysis of this evidence.  
25  
26

# I. BUSINESS FORMATIONS AND RECORDS

10. The Corporate Defendants were created by documents filed with either state governmental agencies in California or Nevada, and the Tribal Defendant was established pursuant to tribal resolutions. Although incorporated in Nevada, Lead Express and Kotobuki Marketing registered with California to transact business within the state.
11. Although not all images are available online, California allows the public to access and download company formation and amendatory documents from its state-run website.<sup>1</sup> Nevada allows ordering these same records through its Commercial Recordings Division in the Office of the Secretary of State (“SOS”).<sup>2</sup> In contrast, the Tribal Defendant’s organizing documents and entity records were not readily publicly available, but they submitted them to third parties to establish financial accounts.
12. During the investigation, the FTC obtained company records from California and Nevada in the manner described in the preceding paragraph. The FTC acquired company records of the Tribal Defendant through compulsory process issued to financial institutions. True and correct copies of the Corporate and Tribal Defendants’ organizational and amendatory documents are summarized in Table 1 below.

**Table 1**

Entity Name	Attachment	State	Formation Date	Status
Lead Express, Inc.	A	CA	Sept. 24, 2013	Surrendered
		NV	Jan. 25, 2011	Active
Camel Coins, Inc.	B	CA	Nov. 8, 2011	Dissolved
		NV	Mar. 19, 2012	Active
Sea Mirror, Inc.	C	CA	Feb. 8, 2013	Dissolved
		NV	Feb. 21, 2012	Active
Naito Corp.	D	CA	July 28, 2006	Dissolved
		NV	Oct. 5, 2018	Active
Kotobuki Marketing, Inc.	E	CA	July 13, 2016	Surrendered
		NV	Dec. 4, 2014	Active

<sup>1</sup> California’s business database is available at <https://businesssearch.sos.ca.gov/>.

<sup>2</sup> Nevada’s business database is available at <https://esos.nv.gov/EntitySearch/OnlineEntitySearch>.

Ebisu Marketing, Inc.	<b>F</b>	CA	Mar. 3, 2010	Active
Hotei Marketing, Inc.	<b>G</b>	CA	Mar. 6, 2013	Active
Daikoku Marketing, Inc.	<b>H</b>	CA	Apr. 30, 2013	Active
La Posta Tribal Lending Enterprise	<b>I</b>	Tribal	Apr. 21, 2010	Active

13. A review of the Tribal Defendant's organizing documents in **Attachment I** shows that it has also registered the following trade names: Harvest Moon Financial, Gentle Breeze, and Green Stream Lending.

## II. INDIVIDUAL DEFENDANTS

### A. Takehisa Naito

14. Takehisa Naito is connected to each of the Corporate Defendants as either an owner, director, or officer, and usually all three. Table 2 below summarizes the connections between Takehisa Naito and the Corporate Defendants.

**Table 2**

Title	Company	Source Record	Att.
Owner	Camel Coins, Inc.	Camel Coins WF – 9898 Sig. Card	<b>Att. DDD</b>
	Daikoku Marketing, Inc.	Daikoku Marketing WF – 6881 Sig. Card	<b>Att. EEE</b>
	Ebisu Marketing, Corp.	Ebisu Marketing WF – 6154 Sig. Card	<b>Att. GGG</b>
	Hotei Marketing, Inc.	Hotei Marketing WF – 3413 Sig. Card	<b>Att. HHH</b>
	Kotobuki Marketing, Inc.	Kotobuki Marketing WF – 9062 Sig. Card	<b>Att. III</b>
	Lead Express, Inc.	Lead Express WF – 9880 Sig. Card	<b>Att. JJJ</b>
	Naito, Corp.	Naito Corp WF – 9539 Sig. Card	<b>Att. KKK</b>
	Sea Mirror, Inc.	Sea Mirror WF – 8354 Sig. Card	<b>Att. LLL</b>
Director	Camel Coins, Inc.	NV Corporate Records	<b>B</b>
	Ebisu Marketing, Corp.	CA Corporate Records	<b>F</b>
	Hotei Marketing, Inc.	CA Corporate Records	<b>G</b>
	Kotobuki Marketing, Inc.	NV Corporate Records	<b>E</b>
	Lead Express, Inc.	CA, NV Corporate Records	<b>A</b>
	Naito, Corp.	NV Corporate Records	<b>D</b>
	Sea Mirror, Inc.	NV Corporate Records	<b>C</b>
Chief Executive Officer	Camel Coins, Inc.	CA Corporate Records	<b>B</b>
	Daikoku Marketing, Inc.	CA Corporate Records	<b>H</b>
	Ebisu Marketing, Corp.	CA Corporate Records	<b>F</b>
	Hotei Marketing, Inc.	CA Corporate Records	<b>G</b>
	Kotobuki Marketing, Inc.	CA Corporate Records	<b>E</b>
	Lead Express, Inc.	CA Corporate Records	<b>A</b>
	Naito, Corp.	CA Corporate Records	<b>D</b>

	Sea Mirror, Inc.	CA Corporate Records	<b>C</b>
President	Camel Coins, Inc.	CA, NV Corporate Records	<b>B</b>
	Daikoku Marketing, Inc.	CA Corporate Records	<b>H</b>
	Ebisu Marketing, Corp.	CA Corporate Records	<b>F</b>
	Hotei Marketing, Inc.	CA Corporate Records	<b>G</b>
	Kotobuki Marketing, Inc.	CA, NV Corporate Records	<b>E</b>
	Lead Express, Inc.	CA, NV Corporate Records	<b>A</b>
	Naito, Corp.	CA, NV Corporate Records	<b>D</b>
	Sea Mirror, Inc.	CA, NV Corporate Records	<b>C</b>
Secretary	Camel Coins, Inc.	CA, NV Corporate Records	<b>B</b>
	Ebisu Marketing, Corp.	CA Corporate Records	<b>F</b>
	Lead Express, Inc.	NV Corporate Records	<b>A</b>
	Sea Mirror, Inc.	NV Corporate Records	<b>C</b>
Chief Financial Officer	Camel Coins, Inc.	CA, NV Corporate Records	<b>B</b>
	Ebisu Marketing, Corp.	CA Corporate Records	<b>G</b>
Treasurer	Camel Coins, Inc.	NV Corporate Records	<b>B</b>
	Lead Express, Inc.	NV Corporate Records	<b>A</b>
	Sea Mirror, Inc.	NV Corporate Records	<b>C</b>
Vice President	Ebisu Marketing, Corp.	CA Corporate Records	<b>F</b>
	Sea Mirror, Inc.	CA Corporate Records	<b>C</b>
Authorized signatory	Camel Coins, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>WW, DDD, MMM</b>
	Daikoku Marketing, Inc.	Wells Fargo signature cards	<b>EEE</b>
	Ebisu Marketing, Corp.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>XX, FFF, GGG, MMM</b>
	Hotei Marketing, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>CCC, HHH, MMM</b>
	Kotobuki Marketing, Inc.	Open Bank, Wells Fargo signature cards	<b>YY, III</b>
	Lead Express, Inc.	Open Bank, Wells Fargo signature cards	<b>ZZ, JJJ</b>
	Naito, Corp.	Open Bank, Wells Fargo signature cards	<b>AAA, KKK</b>
	Sea Mirror, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>BBB, HHH, MMM</b>

## B. Keishi Ikeda

15. Keishi Ikeda is connected to each of the Corporate Defendants as either an owner, director, officer, or registered agent. Table 3 below summarizes the connections between Keishi Ikeda and the Corporate Defendants.

**Table 3**

<b>Title</b>	<b>Company</b>	<b>Source Record</b>	<b>Att.</b>
Owner	Kotobuki Marketing, Inc.	Kotobuki Marketing OB – 3791 Sig. Card	<b>YY</b>
Director	Kotobuki Marketing, Inc.	NV Corporate Records	<b>E</b>

Secretary	Camel Coins, Inc.	CA, NV Corporate Records	<b>B</b>
	Daikoku Marketing, Inc.	CA Corporate Records	<b>H</b>
	Hotei Marketing, Inc.	CA Corporate Records	<b>G</b>
	Kotobuki Marketing, Inc.	CA, NV Corporate Records	<b>E</b>
	Lead Express, Inc.	CA, NV Corporate Records	<b>A</b>
	Naito, Corp.	CA, NV Corporate Records	<b>D</b>
	Sea Mirror, Inc.	CA, NV Corporate Records	<b>C</b>
Chief Financial Officer	Camel Coins, Inc.	CA Corporate Records	<b>B</b>
	Daikoku Marketing, Inc.	CA Corporate Records	<b>H</b>
	Ebisu Marketing, Corp.	CA Corporate Records	<b>F</b>
	Hotei Marketing, Inc.	CA Corporate Records	<b>G</b>
	Kotobuki Marketing, Inc.	CA Corporate Records	<b>E</b>
	Lead Express, Inc.	CA Corporate Records	<b>A</b>
	Naito, Corp.	CA Corporate Records	<b>D</b>
Treasurer	Sea Mirror, Inc.	CA Corporate Records	<b>C</b>
	Camel Coins, Inc.	NV Corporate Records	<b>B</b>
	Kotobuki Marketing, Inc.	NV Corporate Records	<b>E</b>
	Lead Express, Inc.	CA, NV Corporate Records	<b>A</b>
	Naito, Corp.	NV Corporate Records	<b>D</b>
Registered Agent	Sea Mirror, Inc.	CA, NV Corporate Records	<b>C</b>
	Ebisu Marketing, Corp.	CA Corporate Records	<b>F</b>
Authorized Signatory	Camel Coins, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>WW, DDD, MMM</b>
	Daikoku Marketing, Inc.	Wells Fargo signature cards	<b>EEE</b>
	Ebisu Marketing, Corp.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>XX, FFF, GGG, MMM</b>
	Hotei Marketing, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>CCC, HHH, MMM</b>
	Kotobuki Marketing, Inc.	Open Bank, Wells Fargo signature cards	<b>YY, III</b>
	Lead Express, Inc.	Open Bank, Wells Fargo signature cards	<b>ZZ, JJJ</b>
	Naito, Corp.	Open Bank, Wells Fargo signature cards	<b>AAA, KKK</b>
	Sea Mirror, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>BBB, HHH, MMM</b>
Authorized user cash management services	La Posta Tribal Lending Enterprise	Cash Management Agreements	<b>II, JJ, KK</b>
Authorized representative for electronic payments	La Posta Tribal Lending Enterprise	Company Agreements for Electronic Payments	<b>LL, MM, NN</b>

### III. CONSUMER COMPLAINTS

16. During the course of the investigation, the FTC obtained consumer complaints from two sources: the Consumer Sentinel Network (“Sentinel”) and the Better Business Bureau



1 (“BBB”). Sentinel is a database of consumer complaints maintained and administered by the  
2 FTC. Access to complaints is reserved to law enforcement agencies who become a Sentinel  
3 member. Sentinel receives complaints from consumers who directly contact the FTC, as well  
4 as those shared by data contributors, including other law enforcement agencies and consumer  
5 protection organizations. Given the vast number of complaints from numerous sources,  
6 Sentinel complaints are purged from the database regularly every five years.

7  
8 17. During the course of the investigation, I searched the Sentinel database for complaints filed  
9 against Defendants. I found 972 consumer complaints submitted to Sentinel as of May 7,  
10 2020 regarding Defendants. Not all of these complaints include details about the subject  
11 transactions. Some only include consumer information, the type of product or service  
12 involved, and the subject business’s information. Of the complaints that do include a  
13 substantive narrative though, the majority report the business practices set forth in the FTC’s  
14 complaint. True and correct copies of the Sentinel complaints collected are available upon  
15 request.  
16

17 18. During the investigation, the FTC obtained, and I reviewed, records from the BBB serving  
18 the Pacific Southwest regarding Defendants. The BBB records include both consumer  
19 reviews and complaints. Whereas a BBB review is a comment of a consumer’s experience  
20 with a business, a BBB complaint involves correspondence between the consumer, BBB, and  
21 subject business working to resolve a dispute that arose from a transaction. The BBB  
22 typically sends consumer complaints to Sentinel. I reviewed the complaints submitted by the  
23 BBB to determine whether the complaints we received from the BBB were duplicates of the  
24 complaints I downloaded through Sentinel. I determined that there are seventy-seven BBB  
25  
26

complaints that were not included in the Sentinel complaints, bringing the total complaints concerning the Defendants to 1,049 from December 2011 to May 2020.

19. True and correct copies of the BBB records the FTC obtained are attached to my declaration as noted in Table 4 below.

**Table 4**

Trade Name	Attachment	BBB Record Type	Time Period	Record Count
Gentle Breeze	<b>J</b>	Complaints	Dec. 2011–Mar. 2020	165
		Reviews	June 2015–Mar. 2019	65
Green Stream Lending	<b>K</b>	Complaints	Feb. 2014–Mar. 2020	159
		Reviews	June 2014–Mar. 2019	46
Harvest Moon Financial	<b>L</b>	Complaints	June 2013–Mar. 2020	121
		Reviews	Apr. 2014–Apr. 2019	51

#### **IV. DEFENDANTS' WEBSITES**

20. Throughout the course of the investigation, I regularly visited the various websites related to the Defendants and this scheme. I periodically preserved each of these websites using one of three tools, or some combination of the three. One is HTTrack, a free Web crawler and offline browser utility that allows users to download a website from the Internet.<sup>3</sup> The second is the Snip & Sketch app, which allows a user to capture screenshots, available on Windows 10 devices. The third is Camtasia, a screen recording software available for purchase.<sup>4</sup>

21. The multiple true and correct copies of the web pages making up the Defendants' websites I captured throughout the investigation are preserved and available upon request. True and correct copies of the most recent versions of Defendants' websites are attached to this

<sup>3</sup> Users can download the HTTrack program at <https://www.httrack.com/>.

<sup>4</sup> More information on Camtasia is available at <https://www.techsmith.com/video-editor.html>.

1 declaration as set forth below. Captures of previous versions of the websites are available  
2 upon request.

- 3 a. gentlebreezeonline.com—**Attachment M**;
- 4 b. greenstreamlending.com—**Attachment N**;
- 5 c. harvestmoonloans.com—**Attachment O**;
- 6 d. kotobukimarketing.com—**Attachment P**;
- 7 e. naito-corp.com—**Attachment Q**;
- 8 f. naitogroup.com—(redirects to naito-corp.com) **Attachment R**.

9  
10 22. Defendant's websites, harvestmoonloans.com, greenstreamlending.com, and  
11 gentlebreezeonline.com, contain redirect web addresses to lendredirect.com for the following  
12 navigation buttons: Login, Apply Now, and Contact Us. Defendant's website  
13 gentlebreezeonline.com also includes links to the same domain, lendredirect.com, for the My  
14 Account and View Privacy Policy buttons.

15  
16 23. During the course of the investigation, I visited the harvestmoonloans.com website and  
17 clicked on the "Apply Now" hyperlink. As mentioned, I was redirected to a landing page on  
18 lendredirect.com. The landing page consisted of an online payday loan application with  
19 many blank fields in which an applicant would enter information. The application page  
20 asked for such information as name, address, date of birth, Social Security number,  
21 employment information, financial information (including bank name, routing number, and  
22 account number). The webpage allows applicants to select the amount they want to borrow  
23 using a drop down box. I did not enter any information and proceed beyond the landing  
24 page. I recorded this visit using the Camtasia. A copy of the screen recording is available  
25 upon request.  
26

24. During the investigation, I monitored another short-term loan website owned by the Tribal Defendant, jetcredit365.com. The multiple true and correct copies of this website that I captured throughout the investigation are preserved and available upon request. A true and correct copy of the most recent capture of this website is appended as **Attachment S**.

## V. DOMAIN NAME REGISTRATION RECORDS

25. During the investigation, the FTC issued a civil investigative demand to, and obtained records from, GoDaddy.com LLC, an Internet domain registrar and web hosting company. True and correct copies of the registration information provided by GoDaddy are attached hereto as follows:

a. GoDaddy Shopper ID 29537467—**Attachment T**;

b. GoDaddy Shopper ID 41348753—**Attachment U**.

26. The payment information provided by GoDaddy for gentlebreezeonline.com, greenstreamlending.com, and harvestmoonloans.com shows Tumbleweed Software, Inc., doing business as Answers ETC.,<sup>5</sup> pays the invoices directed to the Tribal Defendant for these domain names.

27. After the FTC received the documents from GoDaddy, the domain name registration of camelcoins.com, gentlebreezeonline.com, harvestmoonloans.com, mygbo.com, naito-corp.com, naitogroup.com, and sea-mirror.com entered a brief expiration period.<sup>6</sup> However,

---

<sup>5</sup> Through research, I found that Tumbleweed Software, Inc. is a Texas corporation. Doing business as Answers, ETC., it provides, among other things, loan management software that allows customers to create different loan types (e.g., single pay, installment loan, etc.), underwrite loans, and process loan payments. Answers, ETC. is the domain name registrant organization of lendredirect.com, the redirect web address embedded in the Tribal Defendant's websites discussed above in Paragraph 22. More information regarding Tumbleweed Software is available on its website at <https://answersetc.com/>.

<sup>6</sup> Each of these three domain name registrations expired on November 29, 2019, and were updated a day later on November 30, 2019. They are now each set to expire on November 29, 2021.

the registration was immediately updated, DNS, or Domain Name System, service was not interrupted, and the domains remained fully functional.<sup>7</sup>

## VI. COMMERCIAL MAIL RECEIVING AGENCIES

28. Defendant's corporate filings include several variations of the following address: 2780 South Jones Blvd, Suite 200, Las Vegas, NV 89146. Research revealed that address is occupied by the business Forward Nevada, a commercial mail receiving agency ("CMRA"). The use of CMRAs can be indicia of fraud, as such services can be used to hide an entity's actual physical location.

29. During the investigation, I obtained PS Form 1583, Application for Delivery of Mail Through Agent, from the United States Postal Inspection Service for the five following suites at Forward Nevada: 3132, 3637, 3692, 3695, and 3827. True and correct copies of the PS Form 1583s are appended as **Attachment V**. Table 5 below summarizes Defendants' use of services provided by Forward Nevada.

**Table 5**

Applicant	Address	Mail Recipient	Different Related Company Listed
Takehisa Naito	2780 South Jones Blvd, Suite 200-3132, Las Vegas, NV 89146	Takehisa Naito	None
	2780 South Jones Blvd, Suite 200-3637, Las Vegas, NV 89146	Lead Express, Inc.	Naito, Corp.
	2780 South Jones Blvd, Suite 200-3692, Las Vegas, NV 89146	Sea Mirror, Inc.	None
	2780 South Jones Blvd, Suite 200-3695, Las Vegas, NV 89146	Camel Coins, Inc.	None
	2780 South Jones Blvd, Suite 200-3827, Las Vegas, NV 89146	Kotobuki Marketing, Inc.	None

<sup>7</sup> For more information regarding the expiration timeline of domains registered with GoDaddy, visit <https://www.godaddy.com/help/what-happens-when-my-domain-expires-609>.

**VII. SHARED ADDRESSES**

30. During the investigation, I identified a set of addresses, besides the address discussed above, that Defendants have used. Table 6 below summarizes those shared addresses and associated entities.

**Table 6**

101 Convention Center Drive, Suite 500 Las Vegas, NV 89109 (Office building – current call center)		
Associated Entity	Source Record	Att.
Camel Coins, Inc.	Camel Coins WF – 9898 Sig. Card	Att. III
Daikoku Marketing, Inc.	Daikoku Marketing WF – 6881 Sig. Card	Att. JJJ
Ebisu Marketing, Corp.	Ebisu Marketing WF – 6154 Sig. Card	Att. LLL
Hotei Marketing, Inc.	Hotei Marketing WF – 3413 Sig. Card	Att. MMM
Kotobuki Marketing, Inc.	Kotobuki Marketing WF – 9062 Sig. Card	Att. NNN
Lead Express, Inc.	Lead Express WF – 9880 Sig. Card	Att. OOO
Naito, Corp.	Naito Corp WF – 9539 Sig. Card	Att. PPP
Sea Mirror, Inc.	Sea Mirror WF – 8354 Sig. Card	Att. QQQ
1930 Wilshire Boulevard, Suite 400 Los Angeles, CA 90057 (Commercial building – previous call center)		
Associated Entity	Source Record	Att.
Camel Coins, Inc.	CA Statement of Information 2011	B
Daikoku Marketing, Inc.	CA Articles of Incorporation 2013	H
	CA Statement of Information 2018, 2019	
Ebisu Marketing, Corp.	CA Statement of Information 2011, 2012, 2018-2020	F
Hotei Marketing, Inc.	CA Articles of Incorporation 2013	G
	CA Statement of Information 2018-2020	
Lead Express, Inc.	CA Statement of Information 2014	A
Naito, Corp.	CA Statement of Information 2017, 2018	D
	LA County Clerk Fictitious Business Name Statement 2011	
8 1/2 Crestwood Road Boulevard, CA 91905 (Tribal land)		
Associated Entity	Source Record	Att.
Gentle Breeze Online	Website	M
Green Stream Lending	Website	N
Harvest Moon Financial	Website	O

**VIII. LOAN APR CALCULATIONS**

31. During the course of the investigation, I calculated the annual percentage rate (“APR”) for loans to certain consumers from Defendants based on those consumers’ loan amounts,

number of payments, and total of payments, and compared the resulting APRs to the advertised terms on the Defendants' websites. To calculate accurate APRs on closed-end loans under TILA, and its implementing Regulation Z, I used a computer program named "APRWIN," which is produced and managed by the Office of the Comptroller of the Currency (OCC), available for download at <https://www.occ.treas.gov/tools-forms/tools/compliance-bsa/aprwin-software.html>. OCC states the product, initially released in May 2008, is "an efficient tool for verifying annual percentage rates." The tool is commonly relied upon by government agencies to calculate APRs.

32. To calculate the APRs for each consumer's loan, I used the payment history records of consumers Rebecca Brinks, Eboni Cohran, Rachel Hayes, Todd Jordan, Jennifer Kircher, Shannon McCollum, Jeremy Neal, and Schana Taylor, which are attached to their respective declarations and can be found at PX01 Att. D, PX06 Att. C, PX07 Att. A, PX08 Att. A, PX09 Att. A, PX11 Att. B, Aoun Att. A, Jenkins Att. D. Table 7 below compares the actual number of payments each consumer made versus the number of payments advertised on Defendants' websites.

**Table 7**

Consumer	Amount Borrowed	Advertised Number of Payments	Actual Number of Payments	Difference between Actual and Advertised Number of Payments
Brinks	\$100	1	3	2
Brinks	\$200	1	11	10
Brinks	\$100	1	7	6
Cohran	\$200	1	10	9
Cohran	\$100	1	4	3
Hayes	\$250	1	12	11
Jordan	\$150	1	10	9
Jordan	\$100	1	7	6
Kircher	\$200	1	6	5
McCollum	\$150	1	11	10
Neal	\$200	1	4	3
Taylor	\$200	1	20	19
Taylor	\$150	1	17	16

33. My review of Defendants' websites shows that they advertise loans with two different fee options: \$30 per \$100 borrowed and \$45 per \$100 borrowed. Tables 8 and 9 below compare the actual total of payments taken by Defendants to repay each consumer's loan versus the total of payments to repay those loans as advertised on Defendants' websites. Table 8 shows the comparisons for the \$30 per \$100 borrowed option, and Table 9 shows the comparisons for the \$45 per \$100 borrowed option.

**Table 8**

Consumer	Amount Borrowed	Advertised Total of Payments**	Actual Total of Payments	Difference between Actual and Advertised Total of Payments
Brinks	\$100	\$131.38	\$238.15	\$106.77
Brinks	\$200	\$262.76	\$1,022.93	\$760.17
Brinks	\$100	\$131.38	\$304.19	\$172.81
Eboni	\$200	\$262.76	\$926.61	\$663.85
Eboni	\$100	\$131.38	\$185.02	\$53.64
Hayes	\$250	\$328.45*	\$1,391.64	\$1,063.19
Jordan	\$150	\$197.07*	\$697.04	\$500.33
Jordan	\$100	\$131.38	\$324.92	\$193.54
Kircher	\$200	\$262.76	\$557.15	\$294.39
McCollum	\$150	\$197.07*	\$765.27	\$568.20
Neal	\$200	\$262.76	\$369.66	\$106.90
Taylor	\$200	\$262.76	\$1,854.41	\$1,591.65
Taylor	\$150	\$197.07*	\$1,183.13	\$986.06

\*Includes advertised fees and interest.

\*\*Advertisements in increments of \$100. Advertised total of payments based on extrapolation.

**Table 9**

Consumer	Amount Borrowed	Advertised Total of Payments**	Actual Total of Payments	Difference between Actual and Advertised Total of Payments
Brinks	\$100	\$146.38	\$238.15	\$91.77
Brinks	\$200	\$292.76	\$1,022.93	\$730.17
Brinks	\$100	\$146.38	\$304.19	\$157.81
Eboni	\$200	\$292.76	\$926.61	\$633.85
Eboni	\$100	\$146.38	\$185.02	\$38.64
Hayes	\$250	\$365.95*	\$1,391.64	\$1,025.69
Jordan	\$150	\$219.57*	\$697.04	\$477.47
Jordan	\$100	\$146.38	\$324.92	\$178.54
Kircher	\$200	\$292.76	\$557.15	\$264.39
McCollum	\$150	\$219.57*	\$765.27	\$545.70
Neal	\$200	\$292.76	\$369.66	\$76.90
Taylor	\$200	\$292.76	\$1,854.41	\$1,561.65
Taylor	\$150	\$219.57*	\$1,183.13	\$963.56



\*Includes advertised fees and interest.

\*\*Advertisements in increments of \$100. Advertised total of payments based on extrapolation.

34. Tables 10 and 11 below compare the actual APR based on the number and total of payment taken by Defendants to repay each consumer's loan versus the APR advertised on Defendants' websites. Table 11 shows the comparisons for the \$30 per \$100 borrowed option, and Table 12 shows the comparisons for the \$45 per \$100 borrowed option.

**Table 10**

Consumer	Amount Borrowed	Advertised APR	Actual APR	Difference between Actual and Advertised APR
Brinks	\$100	818.1214%	2055.7129%	1237.5915%
Brinks	\$200	818.1214%	1096.9984%	278.8770%
Brinks	\$100	818.1214%	1036.1393%	218.0179%
Eboni	\$200	818.1214%	1172.7409%	354.6195%
Eboni	\$100	818.1214%	781.3257%	(36.7957%)
Hayes	\$250	818.1214%	1193.7173%	375.5959%
Jordan	\$150	818.1214%	1077.6106%	259.4892%
Jordan	\$100	818.1214%	1207.4692%	389.5706%
Kircher	\$200	818.1214%	977.8515%	159.7301%
McCollum	\$150	818.1214%	1186.5952%	368.4738%
Neal	\$200	818.1214%	1083.2202%	265.0988%
Taylor	\$200	818.1214%	1371.1660%	553.0446%
Taylor	\$150	818.1214%	1134.8775%	316.7561%

**Table 11**

Consumer	Amount Borrowed	Advertised APR	Actual APR	Difference between Actual and Advertised APR
Brinks	\$100	1209.1929%	2055.7129%	846.52%
Brinks	\$200	1209.1929%	1096.9984%	(112.1945%)
Brinks	\$100	1209.1929%	1036.1393%	(173.0536%)
Eboni	\$200	1209.1929%	1172.7409%	(36.452%)
Eboni	\$100	1209.1929%	781.3257%	(427.8672%)
Hayes	\$250	1209.1929%	1193.7173%	(15.4756%)
Jordan	\$150	1209.1929%	1077.6106%	(131.5823%)
Jordan	\$100	1209.1929%	1207.4692%	(1.7237%)
Kircher	\$200	1209.1929%	977.8515%	(231.3414%)
McCollum	\$150	1209.1929%	1186.5952%	(22.5977%)
Neal	\$200	1209.1929%	1083.2202%	(125.9727%)
Taylor	\$200	1209.1929%	1371.1660%	161.9731%
Taylor	\$150	1209.1929%	1134.8775%	(74.3154%)

1 35. I also calculated the APR based on the terms contained in the TILA disclosures in three  
2 examples of Defendants' loan agreements and determined that Defendants calculated the  
3 APR incorrectly in all three. The TILA disclosure in the loan agreement provided by  
4 Defendants to consumer Rachel Hayes (attached as PX20 Att. C) states an amount financed  
5 of \$250, number of payments of 1, finance charge of \$116.19, total of payments of \$366.19,  
6 and APR of 1130.92%. Using the APRWIN software, the APR for those repayment terms is  
7 actually 1211.6957%. The TILA disclosure in the loan agreement provided by Defendants to  
8 consumer Milaya Paggett (attached as PX20 Att. A) states an amount financed of \$500,  
9 number of payments of 1, finance charge of \$233.88, total of payments of \$733.88, and APR  
10 of 1130.92%. Using the APRWIN software, the APR for those repayment terms is actually  
11 1219.5171%. The TILA disclosure in another loan agreement provided by Defendants to  
12 consumer Milaya Paggett (attached as PX20 Att. B) states an amount financed of \$100,  
13 number of payments of 1, finance charge of \$46.28, total of payments of \$146.28, and APR  
14 of 1299.408%. Using the APRWIN software, the APR for those repayment terms is actually  
15 1206.5857%.

## 18 **IX. BANK RECORDS**

19 36. Pursuant to civil investigative demands issued to financial institutions and through other  
20 means, the FTC obtained records and data concerning Defendants' business accounts and  
21 limited information pertaining to individual accounts. Based upon my review of these  
22 records, I observed that during this scheme, the Defendants primarily operated through the  
23 United States commercial banking system. However, Corporate and Individual Defendants  
24 transacted with Japanese banks, as well. As discussed in more detail below, my review  
25 showed that the consumer-facing front to Defendants' payday operation are the Tribal  
26

Defendant's websites, and consumers' loan repayments are funneled through merchant processing accounts and settlement accounts in the Tribal Defendant's name before going to the Corporate and Individual Defendants' bank accounts. Because the FTC obtained a voluminous amount of records, I do not include each document, such as monthly statements, wire transfers, deposit items, and the like. Instead, I append as attachments true and correct copies of particular records the FTC obtained below, and I summarize the others. True and correct copies of the complete bank records are available upon request.

#### A. Third-Party Service Providers

37. During the investigation, the FTC issued civil investigative demands to, and obtained documents from, PeopleFirst Bank ("PFB"), CNB Bank & Trust, N.A. ("CNB Bank"), and North American Banking Company ("NABC"). Through third-party service providers, the Tribal Defendant used these banks to fund loans to the Tribal Defendant's borrowers and withdraw payments from borrowers' bank accounts via automated clearinghouse ("ACH") credits and debits as well as to receive and return payments associated with imaged cash letters (which are electronic files containing batches of remotely created checks). Based upon my review of the obtained documents, I identified four third-party service provider arrangements involving seven depository institutions. Table 12 below summarizes these findings.

**Table 12**

Third-Party Service Providers	Time Period	Depository Institutions
Merchant Payment Solutions, LLC	June 2019–present	PeopleFirst Bank
Flex Payment Solutions, LLC	Nov. 2017–present	CNB Bank & Trust, N.A.
USIO, Inc. f/k/a Payment Data Systems, Inc.	Sept. 2017–Aug. 2019	North American Banking Company
	May 2017–Sept. 2017	Metropolitan Commercial Bank
	Aug. 2016–May 2017	Generations Federal Credit Union
Viking Client Services, LLC	July 2015–June 2018	North American Banking Company

#### 1. Merchant Payment Solutions, LLC

38. On June 13, 2019, the Tribal Defendant entered into three-year Merchant Services Agreements (“MSAs”) with Merchant Payment Solutions, LLC to process ACH transactions and credit, debit, and prepaid cards. True and correct copies of these MSAs are appended as **Attachments W, X and Y.**

39. On June 24, 2019, the Tribal Defendant opened six settlement accounts at PeopleFirst Bank to receive the consumer payments processed by Merchant Payment Solutions. Table 13 below provides more specifics about each account.

**Table 13**

Settlement Purpose	Settlement Account
ACH Credits	Gentle Breeze PFB – 5760
	Green Stream Lending PFB – 5728
	Harvest Moon Financial PFB – 5784
ACH Debits	Gentle Breeze PFB – 5752
	Green Stream Lending PFB – 5736
	Harvest Moon Financial PFB – 5776

40. The opening documents and account agreements for the Tribal Defendant’s settlement accounts at PeopleFirst Bank list the Tribal Defendant’s purpose as an installment lender. True and correct copies of these account opening documents are appended as **Attachments Z, AA, BB, CC, DD, EE, FF, GG, and HH.**

41. On June 26, 2019, the Tribal Defendant entered into cash management services agreements with PeopleFirst Bank, who sublicenses from Fiserv, that permit users authorized by the Tribal Defendant to, among other things, transfer funds, via computer, through ACH transactions. The Tribal Defendant authorized Keishi Ikeda as a user of these cash management services. A true and correct copy of these Cash Management Agreements are appended as **Attachments II, JJ, and KK.**

42. On June 27, 2019, the Tribal Defendant executed Company Agreements for Electronic Payments (“Electronic Payments’ Agreement”) with PeopleFirst Bank to initiate ACH credits

1 and debits for the purpose of “funding loans and processing loan payments.” The Tribal  
2 Defendant listed Keishi Ikeda as an authorized representative to initiate and instruct  
3 PeopleFirst Bank to submit ACH credits and debits as well as handle ACH credit return  
4 requests from consumers’ banks. Further, on August 13, 2019, the Tribal Defendant  
5 completed a Third-Party Service Provider Agreement acknowledging that Merchant Payment  
6 Solutions will initiate ACH credits and debits to PeopleFirst Bank on behalf of the Tribal  
7 Defendant. True and correct copies of these Electronic Payments’ Agreement and Third-  
8 Party Service Provider Agreement are appended as **Attachments LL, MM, and NN.**

9  
10 43. On March 19, 2020, I spoke with an employee of PeopleFirst Bank. The employee told me  
11 that PeopleFirst Bank had recently requested documents from the Tribal Defendant that they  
12 would not provide. The employee did not go into the specifics just that, as a result,  
13 PeopleFirst Bank decided to close all Tribal Defendant accounts earlier in March 2020.  
14 Because of anticipated payment obligations, however, only one Tribal Defendant account  
15 had actually been closed when we spoke. The Tribal Defendant instructed PeopleFirst Bank  
16 to wire the balance in the closed account to The First National Bank of Albany.  
17

## 18 **2. Flex Payment Solutions, LLC**

19 44. On October 28, 2016, Flex Payment Solutions and CNB Bank entered into an Alliance  
20 Agreement. The Agreement states Flex Payment Solutions, on behalf of its clients, and CNB  
21 Bank would enter into one or more agreements that allowed Flex Payment Solutions’ clients  
22 to perform ACH credits and debits, submit remotely created checks, and handle returns  
23 associated with those submitted remotely created checks through CNB Bank.  
24

25 45. On October 26, 2017, Flex Payment Solutions faxed CNB Bank a referral packet containing  
26 background information about the Tribal Defendant to open a merchant account. The packet

1 included, among other things, the Tribal Defendant's financial reports for 2015, 2016, and  
2 2017, as well as a portion of the Tribal Defendant's Consumer Loan Agreement that has the  
3 following refinance policy language built-in: "Unless otherwise notified, your account will  
4 be debited the minimum amount due to refinance this loan for another term."

5 46. On November 1, 2017, Flex Payment Solutions opened a merchant account, on behalf of the  
6 Tribal Defendant, with CNB Bank, Gentle Breeze CNB – 4144. True and correct copies of  
7 the Alliance Agreement, referral packet, and account opening documents are appended as  
8 **Attachment OO.**  
9

10 47. On March 20, 2020, I spoke with an employee of CNB Bank. This employee told me that  
11 the bank received an email on March 16, 2020 from Flex Payment Solutions, on behalf of the  
12 Tribal Defendant. The email instructed CNB Bank to begin, effective immediately,  
13 transferring consumer funds collected through remotely created checks to three settlement  
14 accounts with The First National Bank of Albany, Gentle Breeze FNBA – 3507, Green  
15 Stream Lending FNBA – 3751, and Harvest Moon Financial FNBA – 3629.  
16

### 17 3. Viking Client Services, LLC

18 48. On November 25, 2019, I received an email from an employee of North American Banking  
19 Company. In an attachment to the email, the employee explained that the Tribal Defendant  
20 has six settlement accounts at the bank to receive payments processed by Viking Client  
21 Services, LLC, also doing business as Viking Billing Service. A true and correct copy of the  
22 email attachment is appended as **Attachment PP.**  
23

24 49. On July 8, 2015, Viking Billing Service opened six settlement accounts, on behalf of the  
25 Tribal Defendant, with North American Banking Company. Table 14 below provides more  
26 specifics about each account.

**Table 14**

<b>Settlement Purpose</b>	<b>Settlement Account</b>
ACH Credits	Gentle Breeze NABC – 6427
	Green Stream Lending NABC – 6468
	Harvest Moon Financial NABC – 6443
ACH Debits	Gentle Breeze NABC – 6435
	Green Stream Lending NABC – 6476
	Harvest Moon Financial NABC – 6450

50. A true and correct copy of the account opening documents at North American Banking Company are appended as **Attachments QQ, RR, SS, TT, UU, and VV.**

#### **4. USIO, Inc. f/k/a Payment Data Systems, Inc.**

51. The November 25, 2019 email from North American Banking Company discussed above also stated that in September 2017, the Tribal Defendant began using Payment Data Systems, who was a processing client of North American Banking Company, to process ACH credits and debits related to consumer loans until August 2019.

52. During my analysis of the Tribal Defendant's checking accounts at First Dakota National Bank, Gentle Breeze FDNB – 9322, Green Stream Lending FDNB – 8212, and Harvest Moon Financial FDNB – 9232, I observed ACH transactions from Metropolitan Commercial Bank and Generations Federal Credit Union processed by Payment Data Systems.

### **B. Business Checking Accounts**

#### **1. Corporate Defendants**

53. During the investigation, the FTC issued civil investigative demands to, and obtained documents from, Open Bank, Wells Fargo Bank, and Bank of Hope at which the Corporate Defendants maintain bank accounts. The FTC obtained records and data concerning the Corporate Defendant's business checking accounts, which allows them to perform day-to-day banking tasks, such as accepting deposits, making payments, transferring funds, withdrawing cash and the like. During this scheme, the Corporate Defendants have opened

numerous checking accounts at different banks. My review of the bank records shows that individual Defendants, Takehisa Naito and Keishi Ikeda have been authorized signers on these accounts. I summarize the Corporate Defendants' business checking accounts uncovered during the investigation in Table 15 below.

**Table 15**

Financial Institution	Account Name	Last 4 Digits	Time Period	Opening Document(s)
Open Bank	Camel Coins, Inc.	0482	May 2013–present	Att. WW
	Ebisu Marketing, Corp.	0466	May 2013–present	Att. XX
	Kotobuki Marketing, Inc.	3791	Feb. 2017–present	Att. YY
	Lead Express, Inc.	0474	May 2013–present	Att. ZZ
	Naito, Corp.	0458	May 2013–present	Att. AAA
	Sea Mirror, Inc.	0557	June 2013–present	Att. BBB
	Hotei Marketing, Inc.	0490	May 2013–July 2017	Att. CCC
Well Fargo Bank, N.A.	Camel Coins, Inc.	9898	Nov. 2012–present	Att. DDD
	Daikoku Marketing, Inc.	6881	May 2013–present	Att. EEE
	Ebisu Marketing, Inc.	3462	Apr. 2013–present	Att. FFF
		6154	Apr. 2014–present	Att. GGG
	Hotei Marketing, Inc.	3413	Apr. 2013–present	Att. HHH
	Kotobuki Marketing, Inc.	9062	Jan. 2015–present	Att. III
	Lead Express, Inc.	9880	Nov. 2012–present	Att. JJJ
	Naito, Corp.	9539	Dec. 2012–present	Att. KKK
Bank of Hope (f/k/a BBCN Bank)	Sea Mirror, Inc.	8354	Mar. 2013–present	Att. LLL
	Camel Coins, Inc.	5753	June 2012–Jan. 2013	Att. MMM
	Ebisu Marketing, Corp.	3333	Apr. 2010–June 2013	
		4224	Nov. 2010–June 2013	
	Lead Express, Inc.	4550	May 2011–Apr. 2013	
	Hotei Marketing, Inc.	7316	Mar. 2013–Apr. 2013	
	Sea Mirror, Inc.	7324	Mar. 2013–Apr. 2013	
JPMorgan Chase Bank, N.A.	Naito, Corp.	3244	Nov. 2010–Apr. 2013	*
	Lead Express, Inc.	8031	~2012	**

\* Bank of Hope did not provide a signature card or other opening documents for this account, Naito, Corp BOH – 3244, only statements, deposits, cancelled checks, and wire transfers.

\*\* Wire transfer records associated with Harvest Moon Financial CVB – 6746 denote the existence of this account. The FTC did not obtain any bank records from JPMorgan Chase Bank, pursuant to our issued CID. Likely because the applicable time period, August 1, 2016 to present, started after the account was closed.

## 2. Tribal Defendant

54. During the investigation, the FTC issued civil investigative demands to, and obtained documents from, First Dakota National Bank and Chippewa Valley Bank at which (along with the settlement accounts described above) the Tribal Defendant maintains bank accounts.



I summarize the Tribal Defendant's business checking accounts uncovered during the investigation in Table 16 below.

**Table 16**

<b>Financial Institution</b>	<b>Account Name</b>	<b>Last 4 Digits</b>	<b>Time Period</b>	<b>Opening Documents</b>
PeopleFirst Bank	Gentle Breeze	5744	June 2019–present	<b>Att. NNN</b>
	Green Stream Lending	5720	June 2019–present	<b>Att. OOO</b>
	Harvest Moon Financial	5768	June 2019–present	<b>Att. PPP</b>
First Dakota National Bank	La Posta Tribal Lending Enterprise	9782	Feb. 2017–present	<b>Att. QQQ</b>
	Gentle Breeze	9322	May 2013–present	<b>Att. RRR</b>
	Green Stream Lending	8212	May 2013–present	<b>Att. SSS</b>
	Harvest Moon Financial	9232	June 2013–present	<b>Att. TTT</b>
North American Banking Company	Gentle Breeze	6708	Aug. 2015–June 2018	<b>Att. UUU</b>
	Green Stream Lending	6690	Aug. 2015–June 2018	<b>Att. VVV</b>
	Harvest Moon Financial	6682	Aug. 2015–June 2018	<b>Att. WWW</b>
Chippewa Valley Bank	Gentle Breeze	6720	Aug. 2012–Apr. 2014	<b>Att. XXX</b>
	Gentle Breeze	6738	Aug. 2012–Apr. 2014	<b>Att. YYY</b>
	Harvest Moon Financial	6746	Aug. 2012–Apr. 2014	<b>Att. ZZZ</b>
	Harvest Moon Financial	6753	Aug. 2012–Apr. 2014	<b>Att. AAAA</b>

## **X. FLOW OF MONEY**

55. Based on my analysis of the account records that the FTC obtained, pursuant to CIDs, from the Defendants' banks and other records, as appended below, I describe and create tables to summarize the Defendants' movement of funds in this scheme. Unless otherwise noted, the applicable time period for my analysis set forth below covers Defendants' bank transactions from August 1, 2016 to February 28, 2020.

### **A. Corporate Defendants Buy Consumer Traffic for Tribal Defendant's Websites**

56. To drive traffic to the Tribal Defendant's consumer loan websites, the Corporate Defendants paid online advertisers, marketers, and lead sellers. In all, the Corporate Defendants paid more than \$3.5 million to these type of vendors.

57. During the investigation, the FTC became aware of documents produced in separate non-public investigations that related to Defendants. Some documents concern advertising the Tribal Defendant's consumer loan websites and others are about purchasing short-term loan leads. I describe each of these documents in turn below.

1 58. On or about July 16, 2014, Camel Coin, Lead Express, and Sea Mirror each entered into  
2 separate agreements, executed by Takehisa Naito, with an agency to place one or more  
3 advertisements (ad banners, hyperlinks, text content, buttons, newsletters, email, etc.) on the  
4 Internet to drive traffic to the Tribal Defendant's consumer loan websites. In addition, credit  
5 applications submitted to the advertising agency by Camel Coin, Lead Express, and Sea  
6 Mirror claimed their company web addresses were harvestmoonloans.com,  
7 gentlebreezeonline.com, and greenstreamlending.com, respectively.  
8

9 59. On or about October 20, 2014, La Posta Tribal Lending Enterprise, doing business as Gentle  
10 Breeze, appointed Lead Express the authority to manage all lead purchase campaigns with a  
11 lead seller. Moreover, La Posta and Lead Express executed an agreement with this lead  
12 seller to purchase consumer leads.

13 60. In or around December 2014, Sea Mirror entered into an agreement to purchase consumer  
14 leads for payday loans. A true and correct copy of this agreement is attached hereto as  
15 **Attachment BBBB.**  
16

17 **B. Corporate Defendants Make Loans to Tribal Defendant to Lend to Consumers**

18 61. On March 28, 2011, the La Posta Tribal Lending Enterprise and Naito, Corp. executed a  
19 Promissory Note with a principal loan balance up to \$5,000,000. The principal balance  
20 outstanding was to be increased by advances to the Tribal Defendant and decreased by their  
21 remittances. The Promissory Note states the due date of any outstanding portion of the loan  
22 would be due on March 27, 2012 unless extended by the parties. The Tribal Defendant was  
23 required to make monthly interest payments. The customer accounts receivables contained  
24 in the ledger associated with this line of credit partly secured this loan. Takehisa Naito  
25  
26

1 signed this note as Chief Executive Officer (“CEO”) of Naito, Corp. A true and correct copy  
2 of this note is appended as **Attachment CCCC**.

3 62. On March 18, 2012, Green Stream Lending and Naito, Corp. executed a Promissory Note  
4 with a principal loan balance up to \$20,000,000. The principal balance outstanding was to be  
5 increased by advances to the Tribal Defendant and decreased by their remittances. The  
6 Promissory Note states the due date of any outstanding portion of the loan would be due on  
7 March 17, 2018 unless extended by the parties. The Tribal Defendant was required to make  
8 monthly interest payments. The customer accounts receivables contained in the ledger  
9 associated with this line of credit partly secured this loan. Takehisa Naito signed this note as  
10 CEO of Naito, Corp. A true and correct copy of this note is appended as **Attachment**  
11 **DDDD**.

12  
13 63. On September 14, 2012, Harvest Moon Financial and Naito, Corp. executed a Promissory  
14 Note with a principal loan balance up to \$20,000,000. The principal balance outstanding was  
15 to be increased by advances to the Tribal Defendant and decreased by their remittances. The  
16 Promissory Note states the due date of any outstanding portion of the loan would be due on  
17 September 13, 2017 unless extended by the parties. The Tribal Defendant was required to  
18 make monthly interest payments. The customer accounts receivables contained in the ledger  
19 associated with this line of credit partly secured this loan. Takehisa Naito signed this note as  
20 CEO of Naito, Corp. A true and correct copy of this note is appended as **Attachment**  
21 **EEEE**.

22  
23  
24 64. Documents obtained pursuant to civil investigative demand from CNB Bank included  
25 balance sheets prepared as of December 31, 2015 and 2016 for the Tribal Defendant  
26 (Attachment OO). The 2015 balance sheet reflects notes payables to Naito, Corp. for

\$5,227,973.20 and interest payable of \$26,632.66. The 2016 balance sheet reflects notes payables to Naito, Corp. for \$3,315,662.41 and interest payable of \$8,464.49.

### C. Corporate Defendants Pay Costs of Tribal Defendant's Websites' Telephones

65. In or around September 2015, the Defendants used Naito, Corp. to establish a telecommunications account with Convergence Communications, Inc. ("Convergence Communications").<sup>8</sup> The FTC obtained, pursuant to a civil investigative demand, documents and data associated with that account. A copy of all Convergence Communications records are available upon request. A true and correct copy of the relevant Convergence Communications records are appended as **Attachment FFFF**.

66. These records show that, among other things, the following telephone numbers have been assigned to the Naito, Corp. account: (888) 797-6064, (877) 218-7437, (888) 296-7226, (888) 645-4171, and (855) 228-7344—all numbers that the Tribal Defendants list in their consumer loan websites, correspondence with consumers, and loan agreements. The phone numbers (888) 797-6064 and (877) 218-7437 are regularly and consistently associated with Harvest Moon Financial; (888) 296-7226 are regularly and consistently associated with Green Stream Lending; and (888) 645-4171 are regularly and consistently associated with Gentle Breeze Online.

67. The phone number (855) 228-7344 has been connected to Harvest Moon Financial and Green Stream Lending. As discussed above, I reviewed archived versions of the Defendants'

---

<sup>8</sup> On or about March 11, 2020, in response to a request for further information pursuant to the issued CID, I received an email from an employee at Convergence Communications who reported that the company had filed for bankruptcy recently. On or about March 3, 2020, CS Communications was listed as the debtor in a petition filed for Chapter 7 in the United States Bankruptcy Court, Southern District of California. All documents filed in this case, number 20-01237-MM7, may be inspected through PACER (Public Access to Court Electronic Records at [www.pacer.gov](http://www.pacer.gov)).

consumer loan websites. Archived versions of the websites for Harvest Moon Financial and Green Stream Lending include the phone number (855) 228-7344 in their Privacy web pages.

68. These records show that since June 2016 almost \$800,000 has been invoiced to this account. Naito, Corp. and Kotobuki Marketing have paid \$181,266 for the phone service provided by Convergence Communications.

#### **D. Corporate Defendants Pay Tribal Defendant's Service Providers**

69. To carry out this scheme, the Corporate Defendants engage service providers who play a critical role in the Tribal Defendant's ability to underwrite, manage, and service loans issued to consumers. Table 17 summarizes these expenses paid by the Corporate Defendants.

**Table 17**

<b>Service Description</b>	<b>Corporate Account</b>	<b>Amount Paid</b>
Identity and Account Verification	Camel Coins WFB – 9898	\$125,000
	Lead Express WFB – 9880	\$112,500
	Sea Mirror WFB - 8354	\$100,000
Loan Management	Camel Coins WFB – 9898	\$217,957
	Lead Express WFB – 9880	\$195,827
	Sea Mirror WFB - 8354	\$152,650

#### **E. Tribal Defendant Takes Consumer Loan Payments**

70. Based on my analysis of the account records produced by financial institutions from August 1, 2016 to February 28, 2020 and financial statements covering 2015 and 2016, consumer payments, less returns, have totaled more than \$93 million.

71. The Tribal Defendant took consumer funds via ACH debits, negotiable instruments, such as personal checks and U.S. postal money orders, and RCCs. Through Gentle Breeze CNB – 4144, the Tribal Defendant withdrew more than \$2.4 million from consumers' accounts using remotely created checks. True and correct copies of a small selection of remotely created checks deposited into Gentle Breeze CNB – 4144 are appended as **Attachment GGGG**.

72. I summarize the records showing total consumer payments in Table 18 below.

**Table 18**

Account Short Name	Consumer Payments Returned	Consumer Payments Received	Net Consumer Payments Received
2015 Balance Sheet	\$0.00	\$27,501,516.84	\$27,501,516.84
2016 Balance Sheet	\$0.00	\$11,141,486.66	\$11,141,486.66
LPTLE CNB - 7141	\$2,059,866.07	\$4,500,746.95	\$2,440,880.88
LPTLE CNB - 7141	\$625,621.47	\$1,321,146.42	\$695,524.95
Harvest Moon NABC - 6682	\$668.21	\$2,311,712.12	\$2,311,043.91
Green Stream NABC - 6690	\$373.21	\$1,679,650.86	\$1,679,277.65
Gentle Breeze NABC - 6708	\$629.94	\$2,159,627.85	\$2,158,997.91
Harvest Moon FDNB - 9232	\$5,374.58	\$14,955,299.06	\$14,949,924.48
Gentle Breeze FDNB - 9322	\$3,136.93	\$13,545,653.88	\$13,542,516.95
Green Stream FDNB - 8212	\$1,683.97	\$10,594,087.25	\$10,592,403.28
Gentle Breeze PFB - 5752	\$348,984.73	\$2,489,868.68	\$2,140,883.95
Green Stream PFB - 5736	\$289,030.15	\$2,036,389.07	\$1,747,358.92
Harvest Moon PFB - 5776	\$342,880.64	\$2,585,107.90	\$2,242,227.26
Gentle Breeze PFB - 5744	\$835.82	\$658.71	(\$177.11)
Green Stream PFB - 5720	\$1,469.80	\$0.00	(\$1,469.80)
Harvest Moon PFB - 5768	\$160.00	\$0.00	(\$160.00)
<b>Total</b>	<b>\$3,680,715.52</b>	<b>\$96,822,952.25</b>	<b>\$93,142,236.73</b>

#### **F. Defendants Receive Debt Collection Remittances**

73. Both the Corporate and the Tribal Defendants have received consumer funds from debt collections, settlements, or garnishments. These funds are usually in the form of checks deposited along with other negotiable instruments used for consumer payments. By in large, the deposited amounts were from collection activity though, not regular consumer payments. Because of the time constraint of removing each individual consumer payment item, I provide the total deposited amount. The Corporate Defendants received less than \$1,000, while the Tribal Defendants received over \$700,000 through debt collections, settlements, or garnishments.

#### **G. Defendants Commingle Funds**

74. The Defendants frequently transferred money among their accounts. Rounded to the nearest dollar, the Corporate Defendants transferred \$15,728,430 to the Individual Defendants; the Individual Defendants transferred \$15,914,189 to the Corporate Defendants; the Corporate

1 Defendants transferred \$12,035,227 to the Tribal Defendant; and the Tribal Defendants  
2 transferred \$32,800,648 to the Corporate Defendants. There is no apparent business reason  
3 for the transfers between the Corporate Defendants and the Individual Defendants; nor the  
4 transfers from the Corporate Defendants, other than Naito, Corp. (these were likely related to  
5 the Notes), to the Tribal Defendant. In numerous instances, the transfers from the Tribal  
6 Defendants to the Corporate Defendants included a description that the transaction was  
7 related to an expense, such as “leads commission,” “call center,” “interest,” or “principal  
8 payment.” I summarized the transfers from Corporate Defendants to Individual Defendants,  
9 Individual Defendants to Corporate Defendants, Corporate Defendants to Tribal Defendants,  
10 and Tribal Defendants to Corporate Defendants. My summary charts of these transfers are  
11 appended as **Attachment HHHH**.  
12

#### 13 **H. Asset Dissipation**

14 75. My review of documents obtained from Bank of Hope, Open Bank, and Wells Fargo Bank  
15 show numerous wire transfers from corporate accounts to accounts owned or controlled by  
16 Takehisa Naito in Japan. Between May 2012 and April 2013, Lead Express BOH – 4550  
17 wired at least \$600,000 to Lead Kikaku, a business where Takehisa Naito is a president. A  
18 true and correct copy of wire reports for Lead Express BOH – 4550 is appended as  
19  
20 **Attachment IIII**.

21 76. The Federal Reserve Bank of New York maintains Fedwire, a funds transfer system that is a  
22 service of the Federal Reserve Banks. I reviewed documents obtained by the FTC from  
23 Fedwire and observed that on March 21, 2017, Naito, Corp. OB – 0458 wired \$40,000 to  
24 Takehisa Naito, and another \$20,000 to a Haekyoung Naito, who I suspect is related to  
25 Takehisa Naito.  
26

77. There has been regular disbursements from corporate accounts for seemingly personal expenses, such as automobile expenses, credit cards, meals, and lodging. However, the FTC did not obtain records from American Express. Therefore, it is possible the purchases made using American Express were business related. Nevertheless, I include these expenses here because the FTC did obtain monthly statements concerning the Corporate Defendants' credit cards issued through Wells Fargo Bank, N.A., and the majority of purchases were personal in nature. Based on my analysis, the Corporate Defendants spent at least \$1.9 million of corporate funds for personal expenses.

78. The largest portion of personal expenditures is credit cards. The Corporate Defendants paid American Express and Wells Fargo Bank, N.A. about \$1,774,312. The Corporate Defendants spent another \$129,348 on automobile expenses. These were primarily a monthly payment to Mercedes Benz Financial Services. There were monthly country club dues, too, totaling \$23,997. The Corporate Defendant also appears to have paid the U.S. Internal Revenue Service over \$10,000 on behalf of Keishi Ikeda. Lodging, meals, and travel, which included overseas trips, topped \$7,000. Lastly, the Corporate Defendant directly covered more than \$1,500 in medical bills. Copies of these checks are attached as **Attachment JJJJ**.

79. The Corporate Defendants' bank records show that funds were disbursed from the corporate accounts in the form of cash withdrawals, checks made payable to "cash," wires to individuals, and checks made out to the Individual Defendants. In the table below, Table 19, I describe gross funds paid to Takehisa Naito and Keishi Ikeda.

**Table 19**

Defendant	ADP Gross Salary (See Table 20)	Withdrawals	Checks Written to Cash	Checks/Wires	Total Funds Paid
Takehisa Naito	\$227,000	\$0	\$52,600	\$360,000	\$639,600
Keishi Ikeda	\$898,320	\$49,157	\$34,856	\$105,420	\$1,087,753



**XI. ADP PAYROLL RECORDS**

80. Pursuant to a CID, the FTC obtained documents from ADP TotalSource, Inc.

(“TotalSource”), a professional employer organization, including copies of Client Services Agreements, ACH/Preauthorized Payments/Direct Debit of Fess/Credits and Additional Processing Terms, Verification of Employment records including payroll and tax information, and general account information for five accounts the Corporate Defendants maintain with TotalSource. True and correct copies of the ACH authorization agreements, verifications of employment, and related account records are appended as **Attachment KKKK**.

81. On or about December 1, 2014, Keishi Ikeda created an account with TotalSource for Daikoku Marketing by signing a CSA and an Authorization Agreement as chief financial officer (“CFO”). The Authorization Agreement grants TotalSource authorization to initiate ACH transactions to Daikoku Marketing WFB – 6881 for funds owed to TotalSource. The account demographics information for this account includes the web address [www.ebisumarketing.com](http://www.ebisumarketing.com). The verification of employment records show Keishi Ikeda on the payroll since at least 2017.<sup>9</sup>

82. On or about December 1, 2014, Keishi Ikeda created an account with TotalSource for Ebisu Marketing by signing a CSA and an Authorization Agreement as CFO. The Authorization Agreement grants TotalSource authorization to initiate ACH transactions to Ebisu Marketing WFB – 6154 for funds owed to TotalSource. The account demographics information for this account includes the web address [www.ebisumarketing.com](http://www.ebisumarketing.com).

---

<sup>9</sup> Pursuant to the CID issued to TotalSource, the applicable time period for responsive documents was limited to three years.

1 83. On or about December 1, 2014, Keishi Ikeda created an account with TotalSource for Naito,  
2 Corp. by signing a CSA and an Authorization Agreement as CFO. The Authorization  
3 Agreement grants TotalSource authorization to initiate ACH transactions to Naito Corp WFB  
4 – 9539 for funds owed to TotalSource. The account demographics information for this  
5 account includes the web address www.ebisumarketing.com. The verification of  
6 employment records show Keishi Ikeda on the payroll since at least 2017.

7  
8 84. On or about December 1, 2014, Keishi Ikeda created an account with TotalSource for Hotei  
9 Marketing by signing a CSA and an Authorization Agreement as CFO. The Authorization  
10 Agreement grants TotalSource authorization to initiate ACH transactions to Hotei Marketing  
11 WFB – 3413 for funds owed to TotalSource. The account demographics information for this  
12 account includes the web address www.ebisumarketing.com. The verification of  
13 employment records show Keishi Ikeda on the payroll since at least September 2017.

14  
15 85. On or about January 12, 2017, Keishi Ikeda created an account with TotalSource for  
16 Kotobuki Marketing by signing a CSA and an Authorization Agreement as CFO. The  
17 Authorization Agreement grants TotalSource authorization to initiate ACH transactions to  
18 Kotobuki Marketing WFB – 9062 for funds owed to TotalSource. The account  
19 demographics information for this account includes the address 101 Convention Center Drive,  
20 Suite 500, Las Vegas, NV 89109. The verification of employment records show Takehisa  
21 Naito on the payroll beginning in 2019.

22  
23 86. I reviewed the earnings portion of the verifications of employment included in the  
24 TotalSource CID response. From January 6, 2017 to February 14, 2020, employees of the  
25 Corporate Defendants earned \$1,551,339. Table 20 below summarizes the total gross  
26 earnings by year of the Individual Defendants.

**Table 20**

Individual Defendant	2017	2018	2019	2020	Total
Takehisa Naito	\$0	\$0	\$227,000	Not provided	\$227,000
Keishi Ikeda	\$322,957	\$279,315	\$243,973	\$52,075	\$898,320

**XII. OTHER LAWSUITS**

87. During the course of the investigation, the FTC identified private actions involving, and against, the Defendants. Table 21 below lists these known actions.

**Table 21**

Case Name	Case No.	Court	Relevant Party	Date Filed	Status
Barrios v. Chex Systems, Inc. et al	8:20cv432	M.D. Fla.	Lead Express, Inc. Takehisa Naito	Feb. 25, 2020	Open
Gillison, et al v. Lead Express, Inc. et al	3:16cv41	E.D. Va.	Lead Express, Inc. Takehisa Naito	Jan. 19, 2016	Closed (Dec. 12, 2018)
Turnage, et al v. Clarity Services, LLC	3:14-cv-760	E.D. Va.	Lead Express, Inc. Takehisa Naito La Posta Tribal Lending Enterprise	Nov. 6, 2014	Closed (Sept. 3, 2015)
Christopher Stone v. Ebisu Marketing, Corp. et al	BC655331	CA Superior – Los Angeles	Ebisu Marketing, Corp. Takehisa Naito	Mar. 24, 2017	Closed (May 25, 2017)
Mark Hackett v. Hotei Marketing, Inc. et al	BC639589	CA Superior – Los Angeles	Ebisu Marketing Hotei Marketing, Inc. Harvest Moon Loans	Dec. 19, 2016	Open
Maria Alexandria Valencia v. Ebisu Marketing, Corp.	BC498677	CA Superior – Los Angeles	Ebisu Marketing, Corp.	Jan. 8, 2013	Open
Giovanna Peoples v. Ebisu Marketing, Corp. et al	BC660197	CA Superior – Los Angeles	Ebisu Marketing, Corp. Gentle Breeze Online La Posta Tribal Lending Enterprise	May 5, 2017	Closed (Dec. 6, 2017)
Short v. American Web Loan	2:16cv11304	E.D. Mich.	Lead Express (Terminated)	Apr. 8, 2016	Closed (Nov. 1, 2016)

			Takehisa Naito (Terminated)		
			Gentle Breeze (Terminated)		

88. The FTC reviewed the different filings of the cases above. In *Gillison*, an employee of Lead Express and Takehisa Naito filed declarations concerning, among other things, their roles with the company and the services it provides to La Posta Tribal Lending Enterprise. In *Stone*, the plaintiff alleged that Ebisu Marketing hiring managers explained to him and other job candidates that Ebisu Marketing “provided so-called payday loans to the public.” In *Valencia*, Ebisu Marketing submitted, as an exhibit, an employment agreement between the company and Ms. Valencia, dated April 6, 2011. True and correct copies of these filings are appended as **Attachments LLLL, MMMM, NNNN, and OOOO**.

89. During the investigation, the FTC identified that on March 16, 2011, the State of California, Business, Transportation and Housing Agency, Department of Corporations entered a Desist and Refrain Order against Takehisa Naito and another company for which he was president. The Desist and Refrain Order alleged that Takehisa Naito engaged in the business of finance lending and taking deferred deposit transactions with a license. A true and correct copy of the Desist and Refrain Order downloaded from the Department of Corporations website is attached as **Attachment PPPP**.

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct.

Executed in Washington, D.C. on May 7, 2020.

/s/ Rufus L. M. Jenkins  
Rufus L. M. Jenkins, MBA, CPA, CFE

**PX19 – DECLARATION OF RUFUS JENKINS  
ATTACHMENT INDEX**

<b>Description</b>	<b>Attachment</b>	<b>Page No.</b>
<b>Corporate Records</b>		
Lead Express, Inc.	A	39
Camel Coins, Inc.	B	61
Sea Mirror, Inc.	C	81
Naito Corp.	D	99
Kotobuki Marketing, Inc.	E	113
Ebisu Marketing, Inc.	F	130
Hotei Marketing, Inc.	G	139
Daikoku Marketing, Inc.	H	144
La Posta Tribal Lending Enterprise	I	149
<b>Consumer Complaints</b>		
BBB Complaints – Gentle Breeze	J	190
BBB Complaints – Green Stream	K	403
BBB Complaints – Harvest Moon	L	612
<b>Web Captures</b>		
Gentlebreezeonline.com	M	774
Greenstreamlending.com	N	779
Harvestmoonloans.com	O	795
Kotobukimarketing.com	P	810
Naitocorp.com	Q	815
Naito-group.com	R	823
Jetcredit365.com	S	831
<b>Domain Registrations</b>		
GoDaddy Shopper ID 29537467 – Takehisa Naito	T	843
GoDaddy Shopper ID 41348753 – La Posta Tribal Lending Enterprise	U	1092
<b>Commercial Mail Receiving Agencies</b>		
Applications for Delivery of Mail through Agent	V	1226
<b>Bank Records</b>		
Merchant Payment Solutions – Merchant Services Agreement – Gentle Breeze	W	1232
Merchant Payment Solutions – Merchant Services Agreement – Green Stream	X	1247
Merchant Payment Solutions – Merchant Services Agreement – Harvest Moon	Y	1262
PeopleFirst Bank – Gentle Breeze account opening documents	Z	1277
Signature Cards – Gentle Breeze PFB-5760	AA	1288
Signature Cards – Gentle Breeze PFB-5752	BB	1291
PeopleFirst Bank – Green Stream account opening documents	CC	1294
Signature Cards – Green Stream PFB-5728	DD	1300
Signature Cards – Green Stream PFB-5736	EE	1302

PeopleFirst Bank – Harvest Moon account opening documents	FF	1304
Signature Cards – Harvest Moon PFB-5784	GG	1311
Signature Cards – Harvest Moon PFB-5776	HH	1313
PeopleFirst Bank – Cash Management Agreement – Gentle Breeze	II	1315
PeopleFirst Bank – Cash Management Agreement – Green Stream	JJ	1321
PeopleFirst Bank – Cash Management Agreement – Harvest Moon	KK	1327
PeopleFirst Bank – Electronic Payment Agreement – Gentle Breeze	LL	1333
PeopleFirst Bank – Electronic Payment Agreement – Green Stream	MM	1356
PeopleFirst Bank – Electronic Payment Agreement – Harvest Moon	NN	1379
Documents from CNB Bank & Trust	OO	1402
Email from North American Banking Company	PP	1436
Signature Cards – Gentle Breeze NAB-6427	QQ	1438
Signature Cards – Gentle Breeze NAB-6435	RR	1448
Signature Cards – Green Stream NAB-6468	SS	1458
Signature Cards – Green Stream NAB-6476	TT	1468
Signature Cards – Harvest Moon NAB-6443	UU	1478
Signature Cards – Harvest Moon NAB-6450	VV	1488
Signature Cards – Camel Coins OB-0482	WW	1498
Signature Cards – Ebisu Marketing OB-0466	XX	1510
Signature Cards – Kotobuki Marketing OB-3791	YY	1522
Signature Cards – Lead Express OB-0474	ZZ	1530
Signature Cards – Naito Corp OB-0458	AAA	1549
Signature Cards – Sea Mirror OB-0557	BBB	1561
Signature Cards – Hotei Marketing OB-0490	CCC	1571
Signature Cards – Camel Coins WF-9898	DDD	1583
Signature Cards – Daikoku Marketing WF-6881	EEE	1597
Signature Cards – Ebisu Marketing WF-3462	FFF	1611
Signature Cards – Ebisu Marketing WF-6154	GGG	1618
Signature Cards – Hotei Marketing WF-3413	HHH	1625
Signature Cards – Kotobuki Marketing WF-9062	III	1639
Signature Cards – Lead Express WF-9880	JJJ	1651
Signature Cards – Naito Corp WF-9539	KKK	1665
Signature Cards – Sea Mirror WF-8354	LLL	1679
Signature Cards – Bank of Hope	MMM	1693
Signature Cards – Gentle Breeze PFB-5744	NNN	1700
Signature Cards – Green Stream PFB-5720	OOO	1703
Signature Cards – Harvest Moon PFB-5768	PPP	1705
Signature Cards – La Posta TLE FD-9782	QQQ	1707
Signature Cards – Gentle Breeze FD-9322	RRR	1714
Signature Cards – Green Stream FD-8212	SSS	1722
Signature Cards – Harvest Moon FD-9232	TTT	1729
Signature Cards – Gentle Breeze NAB-6708	UUU	1734
Signature Cards – Green Stream NAB-6690	VVV	1741
Signature Cards – Harvest Moon NAB-6682	WWW	1748
Signature Cards – Gentle Breeze CVB-6720	XXX	1753

Signature Cards – Gentle Breeze CVB-6738	YYY	1755
Signature Cards – Harvest Moon CVB-6746	ZZZ	1757
Signature Cards – Harvest Moon CVB-6753	AAAA	1759
<b>Lead Seller Documents</b>		
Leadsmarket.com documents	BBBB	1761
<b>Promissory Notes</b>		
Gentle Breeze	CCCC	1765
Green Stream	DDDD	1773
Harvest Moon	EEEE	1781
<b>Telecommunication Records</b>		
Convergence Communications documents	FFFF	1789
<b>Remotely Created Checks</b>		
Copies of documents from CNB Bank & Trust	GGGG	1814
<b>Commingling of Funds</b>		
Chart of Activity	HHHH	1830
<b>Asset Dissipation Documents</b>		
Bank of Hope - Offshore Wires	IIII	1835
Wells Fargo – selected checks	JJJJ	1844
<b>Payroll Documents</b>		
Documents from ADP TotalSource	KKKK	1989
<b>Other Lawsuits</b>		
Documents from Gillison v. Lead Express	LLLL	2047
Documents from Turnage v. Clarity Services	MMMM	2071
Documents from Stone v. Ebisu Marketing	NNNN	2075
Documents from Valencia v. Ebisu Marketing	OOOO	2121
Desist and Refrain Order from California Department of Corporations	PPPP	2131

# **ATTACHMENT A**






ROSS MILLER  
Secretary of State  
204 North Carson Street, Suite 4  
Carson City, Nevada 89701-4520  
(775) 684 5708  
Website: [www.nvsos.gov](http://www.nvsos.gov)



## Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number <b>20110058213-33</b> Filing Date and Time <b>01/25/2011 10:30 AM</b> Entity Number <b>E0043102011-0</b>
--	---

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Corporation:</b>	Lead Express, Inc.		
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: Business Filings Incorporated <small>Name</small> <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below) Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity Street Address City Nevada Zip Code Mailing Address (if different from street address) City Nevada Zip Code		
<b>3. Authorized Stock:</b> (number of shares corporation is authorized to issue)	Number of shares with par value: 2000	Par value per share: \$ 0.01	Number of shares without par value:
<b>4. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) Takehisa Naito <small>Name</small> 550 N Figueroa St., #4077 Los Angeles CA 90012 <small>Street Address City State Zip Code</small> 2) <small>Name</small> Street Address City State Zip Code		
<b>5. Purpose:</b> (optional; see instructions)	The purpose of the corporation shall be: To engage in any lawful act or activity for which a corporation may be organized under Chapter 78 of NRS.		
<b>6. Name, Address and Signature of Incorporator:</b> (attach additional page if more than one incorporator)	Business Filings Incorporated <small>Name</small> 8040 Excelsior Dr. Ste 200 Madison WI 53717 <small>Address City State Zip Code</small> X  Mark Williams, AVP <small>Incorporator Signature</small>		
<b>7. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity. X  Mark Williams, AVP, Business Filings Incorporated <small>Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity</small> January 25, 2011 <small>Date</small>		

This form must be accompanied by appropriate fees

Nevada Secretary of State NRS 78 Articles  
Revised: 4-10-09

**(PROFIT) INITIAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:**

LEAD EXPRESS, INC

FILE NUMBER

NAME OF CORPORATION

E0043102011-0

FOR THE FILING PERIOD OF 1/2011 TO 1/2012

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

BUSINESS FILINGS INCORPORATED (Commercial Registered Agent)  
311 S DIVISION ST  
CARSON CITY, NV 89703 USA

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number <b>20110148760-60</b> Filing Date and Time <b>02/28/2011 11:08 AM</b> Entity Number <b>E0043102011-0</b>
--	---

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Initial list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by the last day of the first month following the incorporation/initial registration with this office.
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the first month following the initial registration date. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include initial list and business license fees will result in rejection of filing.

INITIAL LIST FILING FEE \$125.00 LATE PENALTY \$75.00 BUSINESS LICENSE FEE \$200.00 LATE PENALTY \$100.00

**CHECK ONLY IF APPLICABLE**

- ☐ Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code: \_\_\_\_\_
- ☐ Month and year your State Business License expires: \_\_\_\_\_ 20\_\_\_\_
- ☐ This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_
- ☐ This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity  
002 - 501(c) Nonprofit Entity  
003 - Home-based Business  
004 - Natural Person with 4 or less rental dwelling units  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 550 N FIGUEROA ST. #4077	CITY LOS ANGELES	STATE CA	ZIP CODE 90012
NAME TAKEHISA NAITO	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 550 N FIGUEROA ST. #4077	CITY LOS ANGELES	STATE CA	ZIP CODE 90012
NAME TAKEHISA NAITO	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 550 N FIGUEROA ST. #4077	CITY LOS ANGELES	STATE CA	ZIP CODE 90012
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR		
ADDRESS 550 N FIGUEROA ST. #4077	CITY LOS ANGELES	STATE CA	ZIP CODE 90012

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X TAKEHISA NAITO

Title  
PRESIDENT

Date  
2/28/2011 11:06:13 AM

Signature of Officer

Nevada Secretary of State Initial List Profit  
Revised 8-5-09

PX19 - 41

**(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:**

LEAD EXPRESS, INC.

FILE NUMBER

NAME OF CORPORATION

E0043102011-0

FOR THE FILING PERIOD OF 1/2012 TO 1/2013

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is

BUSINESS FILINGS INCORPORATED (Commercial Registered Agent)  
311 S DIVISION ST  
CARSON CITY, NV 89703 USA

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

 Ross Miller Secretary of State State of Nevada	Document Number
	20120068558-27
	Filing Date and Time
	01/30/2012 3:31 PM
	Entity Number
	E0043102011-0

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the complete form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE**

- ☐ Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code: \_\_\_\_\_
- ☐ Month and year your State Business License expires: \_\_\_\_\_ 20 \_\_\_\_\_
- ☐ This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_
- ☐ This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity  
002 - 501(c) Nonprofit Entity  
003 - Home-based Business  
004 - Natural Person with 4 or less rental dwelling units  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 6260 W. 3RD ST. #407	CITY LOS ANGELES	STATE CA	ZIP CODE 90036
NAME TAKEHISA NAITO	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 6260 W. 3RD ST. #407	CITY LOS ANGELES	STATE CA	ZIP CODE 90036
NAME TAKEHISA NAITO	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 6260 W. 3RD ST. #407	CITY LOS ANGELES	STATE CA	ZIP CODE 90036
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR		
ADDRESS 6260 W. 3RD ST. #407	CITY LOS ANGELES	STATE CA	ZIP CODE 90036

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**X**

Title

C.E.O.

Date

1/30/2012 3:28:42 PM

Signature of Officer

Nevada Secretary of State Annual List Profit  
Revised 8-5-09

PX19 - 42



**(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND  
STATE BUSINESS LICENSE APPLICATION OF:**LEAD EXPRESS, INC.  
NAME OF CORPORATION

FILE NUMBER

E0043102011-0

FOR THE FILING PERIOD OF JAN, 2013 TO JAN, 2014

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is

**BUSINESS FILINGS INCORPORATED**  
311 S DIVISION ST  
CARSON CITY, NV 89703A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number
	20120826005-26
	Filing Date and Time
	12/07/2012 2:13 PM
	Entity Number
	E0043102011-0

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- ☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:  **NRS 76.020 Exemption Codes**
- NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**
- ☐ This corporation is a publicly traded corporation. The Central Index Key number is:
- ☐ This publicly traded corporation is not required to have a Central Index Key number.

001 - Governmental Entity  
 005 - Motion Picture Company  
 006 - NRS 680B.020 Insurance Co

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 1619 N. LA BREA AVE., #614, USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
NAME TAKEHISA NAITO	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 1619 N. LA BREA AVE., #614, USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
NAME TAKEHISA NAITO	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 1619 N. LA BREA AVE., #614, USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR		
ADDRESS 1619 N. LA BREA AVE., #614, USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**X**

Title

PRESIDENT

Date

12/7/2012 2:12:57 PM

Signature of Officer

Nevada Secretary of State Annual List Profit  
Revised 3-9-12

PX19 - 43

**(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:**

FILE NUMBER

LEAD EXPRESS, INC  
NAME OF CORPORATION


E0043102011-0

FOR THE FILING PERIOD OF JAN, 2013 TO JAN, 2014

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is

BUSINESS FILINGS INCORPORATED  
311 S DIVISION ST  
CARSON CITY, NV 89703A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number
	20130336684-66
	Filing Date and Time
	05/21/2013 12:25 PM
	Entity Number
	E0043102011-0

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- ☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:  **NRS 76.020 Exemption Codes**  
 001 - Governmental Entity  
 005 - Motion Picture Company  
 006 - NRS 680B.020 Insurance Co.
- NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**
- ☐ This corporation is a publicly traded corporation. The Central Index Key number is:
- ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 1619 N. LA BREA AVE., #614, USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
NAME TAKEHISA NAITO	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 1619 N. LA BREA AVE., #614, USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
NAME KEISHI IKEDA	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 136 S. BROADWAY, USA	CITY REDONDO BEACH	STATE CA	ZIP CODE 90277
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR		
ADDRESS 1619 N. LA BREA AVE., #614, USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

X

Signature of Officer

Title	Date
PRESIDENT	5/21/2013 12:25:31 PM

Nevada Secretary of State Annual List Profit  
Revised 3-9-12

PX19 - 44

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

LEAD EXPRESS, INC.

NAME OF CORPORATION

E0043102011-0

FOR THE FILING PERIOD OF JAN, 2014 TO JAN, 2015



\*100101\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverfilume.gov](http://www.nvsilverfilume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form1 Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2 If there are additional officers, attach a list of them to this form

3 Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4 State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5 Make your check payable to the Secretary of State.

6 **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7 Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708

8 Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME

TAKEHISA NAITO

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

ADDRESS

1619 N. LA BREA AVE., #614 , USA

CITY

HOLLYWOOD

STATE

CA

ZIP CODE

90028

NAME

KEISHI IKEDA

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

ADDRESS

136 S. BROADWAY , USA

CITY

REDONDO BEACH

STATE

CA

ZIP CODE

90277

NAME

KEISHI IKEDA

TITLE(S)

TREASURER (OR EQUIVALENT OF)

ADDRESS

136 S. BROADWAY , USA

CITY

REDONDO BEACH

STATE

CA

ZIP CODE

90277

NAME

TAKEHISA NAITO

TITLE(S)

DIRECTOR

ADDRESS

1619 N. LA BREA AVE., #614 , USA

CITY

HOLLYWOOD

STATE

CA

ZIP CODE

90028

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** KEISHI IKEDA

Title

SECRETARY

Date

11/18/2013 5:18:46 PM

**Signature of Officer or  
Other Authorized Signature**Nevada Secretary of State List Profit  
Revised 7-31-13

PX19 - 45



**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

LEAD EXPRESS, INC.

NAME OF CORPORATION

ENTITY NUMBER

E0043102011-0

FOR THE FILING PERIOD OF JAN, 2015 TO JAN, 2016



\*100101\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsliverflume.gov](http://www.nvsliverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number
	20140786365-52
	Filing Date and Time
	12/01/2014 12:51 PM
	Entity Number
	E0043102011-0

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- ☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:  **NRS 76.020 Exemption Codes**
- NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.
- ☐ This corporation is a publicly traded corporation. The Central Index Key number is:
- ☐ This publicly traded corporation is not required to have a Central Index Key number.
- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS <b>1619 N. LA BREA AVE., #614 , USA</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS <b>136 S. BROADWAY , USA</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90277</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS <b>1619 N. LA BREA AVE., #614 , USA</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS <b>1619 N. LA BREA AVE., #614 , USA</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** JAWED SABEH

Title

GENERAL MANAGER

Date

12/1/2014 12:50:56 PM

Signature of Officer or  
Other Authorized SignatureNevada Secretary of State List Profit  
Revised 7-31-13

PX19 - 46

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

LEAD EXPRESS, INC.

E0043102011-0

NAME OF CORPORATION

FOR THE FILING PERIOD OF JAN, 2016 TO JAN, 2017



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsliverflume.gov](http://www.nvsliverflume.gov)\*\***

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number <b>20150522028-17</b>
	Filing Date and Time <b>11/30/2015 2:13 PM</b>
	Entity Number <b>E0043102011-0</b>

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)
**IMPORTANT:** Read instructions before completing and returning this form

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**
☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:  
**NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co

☐ This corporation is a publicly traded corporation. The Central Index Key number is:  
☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS <b>1619 N. LA BREA AVE., #614 , USA</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS <b>136 S. BROADWAY , USA</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90277</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS <b>1619 N. LA BREA AVE., #614 , USA</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS <b>1619 N. LA BREA AVE., #614 , USA</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

Title

PRESIDENT

Date

11/30/2015 2:13:15 PM

**Signature of Officer or  
Other Authorized Signature**Nevada Secretary of State List Profit  
Revised 7-1-15

PX19 - 47



**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

LEAD EXPRESS, INC.

E0043102011-0

NAME OF CORPORATION

FOR THE FILING PERIOD OF JAN, 2017 TO JAN, 2018



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsliverflume.gov](http://www.nvsliverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form1 Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2 If there are additional officers, attach a list of them to this form.

3 Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4 State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5 Make your check payable to the Secretary of State.

6 **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7 Return the completed form to Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8 Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.**NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co

NAME TAKEHISA NAITO		TITLE(S) PRESIDENT (OR EQUIVALENT OF)	
ADDRESS 1930 WILSHIRE BLVD, SUITE 400 , USA	CITY LOS ANGELES	STATE CA	ZIP CODE 90057
NAME TAKEHISA NAITO		TITLE(S) SECRETARY (OR EQUIVALENT OF)	
ADDRESS 1930 WILSHIRE BLVD, SUITE 400 , USA	CITY LOS ANGELES	STATE CA	ZIP CODE 90057
NAME TAKEHISA NAITO		TITLE(S) TREASURER (OR EQUIVALENT OF)	
ADDRESS 1930 WILSHIRE BLVD, SUITE 400 , USA	CITY LOS ANGELES	STATE CA	ZIP CODE 90057
NAME TAKEHISA NAITO		TITLE(S) DIRECTOR	
ADDRESS 1930 WILSHIRE BLVD, SUITE 400 , USA	CITY LOS ANGELES	STATE CA	ZIP CODE 90057

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

☒ TAKEHISA NAITO

Title

PRESIDENT

Date

11/23/2016 8:20:16 AM

**Signature of Officer or  
Other Authorized Signature**Nevada Secretary of State List Profit  
Revised 7-1-15

PX19 - 48

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

LEAD EXPRESS, INC.

E0043102011-0

NAME OF CORPORATION

FOR THE FILING PERIOD OF JAN, 2017 TO JAN, 2018



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 69. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201. (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.**NRS 76.020 Exemption Codes**001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co

NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	
ADDRESS <b>1619 N. LA BREA AVE, #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>DIRECTOR</b>	
ADDRESS <b>1619 N. LA BREA AVE, #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

Title

PRESIDENT

Date

6/9/2017 8:07:24 AM

Signature of Officer or  
Other Authorized SignatureNevada Secretary of State List Profit  
Revised: 7-1-15

PX19 - 49

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

LEAD EXPRESS, INC.

NAME OF CORPORATION

ENTITY NUMBER

E0043102011-0

FOR THE FILING PERIOD OF JAN, 2018 TO JAN, 2019



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

001 - Governmental Entity

006 - NRS 680B 020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	
ADDRESS <b>7430 YONIE CT</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89117</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>DIRECTOR</b>	
ADDRESS <b>7430 YONIE CT</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89117</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

Title

DIRECTOR

Date

12/5/2017 3:07:07 PM

Signature of Officer or  
Other Authorized SignatureNevada Secretary of State List Profit  
Form: 100103 Revised: 7-1-17

PX19 - 50



**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

LEAD EXPRESS, INC.

NAME OF CORPORATION

ENTITY NUMBER

E0043102011-0

FOR THE FILING PERIOD OF JAN, 2019 TO JAN, 2020



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- ☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number <b>20180494349-44</b> Filing Date and Time <b>11/14/2018 3:10 PM</b> Entity Number <b>E0043102011-0</b>
--	--

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- ☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

**NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

001 - Governmental Entity  
006 - NRS 680B 020 Insurance Co.

- ☐ This corporation is a publicly traded corporation. The Central Index Key number is:

- ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO		TITLE(S) PRESIDENT (OR EQUIVALENT OF)	
ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA		TITLE(S) SECRETARY (OR EQUIVALENT OF)	
ADDRESS 2780 SOUTH JONES BLVD., SUITE 200-3133	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA		TITLE(S) TREASURER (OR EQUIVALENT OF)	
ADDRESS 2780 SOUTH JONES BLVD., SUITE 200-3133	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME TAKEHISA NAITO		TITLE(S) DIRECTOR	
ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132	CITY LAS VEGAS	STATE NV	ZIP CODE 89146

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X TAKEHISA NAITO

Signature of Officer or  
Other Authorized Signature

Title PRESIDENT	Date 11/14/2018 3:10:40 PM
--------------------	-------------------------------

Nevada Secretary of State List Profit  
Form: 100103 Revised: 7-1-17

PX19 - 51

3606656

S&amp;DC-S/N

Statement and Designation by  
Foreign Corporation

To qualify a corporation from another state or country to transact intrastate business in California, fill out this form, and submit for filing along with:

- A \$100 filing fee (for a foreign stock corporation) or \$30 filing fee (for a foreign nonprofit corporation), and
- A certificate of good standing, issued within the last six (6) months by the agency where the corporation was formed. **Note:** If the corporation is a nonprofit, the certificate of good standing also must indicate the corporation is a nonprofit or nonstock corporation.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.

**Important!** Corporations in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board. For more information, go to <https://www.ftb.ca.gov>.

This Space For Office Use Only

**FILED**  
Secretary of State  
State of California

1PC SEP 24 2013

For questions about this form, go to [www.sos.ca.gov/business/be/filing-tips.htm](http://www.sos.ca.gov/business/be/filing-tips.htm).

**Corporate Name** (List the exact name of the corporation, as shown in the certificate of good standing. If the name of the corporation is not available for use in the State of California, the corporation must qualify under an assumed name. E.g., "[list the exact name] which will do business in California as [list the proposed assumed name]." For general corporate name requirements and restrictions in California, go to [www.sos.ca.gov/business/be/name-availability.htm](http://www.sos.ca.gov/business/be/name-availability.htm).)

① Lead Express, Inc.

## Corporate History

② State or foreign country where this corporation was formed: Nevada

**Service of Process** (List a California resident or an active 1505 corporation in California that agrees to be your agent to accept service of process in case your corporation is sued. You may list any adult who lives in California. You may **not** list your own corporation as the agent. **Do not** list an address if the agent is a 1505 corporation.)

③ a. Business Filings Incorporated

Agent's Name

b. CA  
Agent's Street Address (if agent is **not** a corporation) City (no abbreviations) State Zip

The corporation named in Item 1 above irrevocably consents to service of process directed to it upon the agent designated above, and to service of process on the California Secretary of State if that agent or that agent's successor is no longer authorized to act or cannot be found at the address given.

## Corporate Addresses

④ a. 2780 S. Jones Blvd Ste. 3637, Las Vegas, Nevada 89146

Street Address of Principal Executive Office City (no abbreviations) State Zip

b. CA  
Street Address of Principal Office in California, if any City (no abbreviations) State Zip

c. Mailing Address of Principal Executive Office, if different from 4a or 4b City (no abbreviations) State Zip

**Read and sign below:** This form must be signed by an officer of the foreign corporation.

Sign here 

Takehisa Naito

Print your name here

President

Your business title

Make check/money order payable to: **Secretary of State**

Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

## By Mail

Secretary of State  
Business Entities, P.O. Box 944260  
Sacramento, CA 94244-2600

## Drop-Off

Secretary of State  
1500 11th Street, 3rd Floor  
Sacramento, CA 95814

3606656

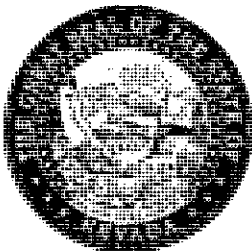
# SECRETARY OF STATE




## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **LEAD EXPRESS, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 25, 2011, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 12, 2013.

  
ROSS MILLER  
Secretary of State

Electronic Certificate  
Certificate Number: C20130912-2277  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>

14 080664



# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

F

29  
ave

**FILED**  
Secretary of State  
State of California  
SEP 29 2014

### 1. CORPORATE NAME

LEAD EXPRESS, INC.  
2780 S JONES BLVD STE 3637  
LAS VEGAS, NV 89146

### 2. CALIFORNIA CORPORATE NUMBER

C3606656

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 2780 S JONES BLVD STE 3637	LAS VEGAS	NV	89146
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD STE 400	LOS ANGELES	CA	90057
6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

	ADDRESS	CITY	STATE	ZIP CODE
7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	1619 N LA BREA AVE #614	HOLLYWOOD	CA	90028
8. SECRETARY KEISHI IKEDA	136 S BROADWAY	REDONDO BEACH	CA	90277
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	136 S BROADWAY	REDONDO BEACH	CA	90277

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

### 10. NAME OF AGENT FOR SERVICE OF PROCESS

C 2113485

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY  
BUSINESS FILINGS INCORPORATED

STATE ZIP CODE  
CA

### Type of Business

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
BUSINESS CONSULTING

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

9/3/2014

KEISHI IKEDA

C.F.O.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE



# State of California

## Secretary of State

### Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**1. CORPORATE NAME**

**2. CALIFORNIA CORPORATE NUMBER**

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to **Item 13**.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE


SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE



01418632

	<b>Secretary of State</b> <b>Certificate of Surrender</b> (Foreign Qualified Corporation ONLY)	<b>SURC</b>
	<p><b>IMPORTANT — Read Instructions before completing this form.</b></p> <p>There is <b>No Fee</b> for filing a Certificate of Surrender</p> <p><b>Copy Fees</b> — First page \$1.00; each attachment page \$0.50;          Certification Fee - \$5.00</p> <p><i>Note:</i> For information about Franchise Tax Board final tax return requirements, go to <a href="https://www.ftb.ca.gov">https://www.ftb.ca.gov</a>.</p>	

**FILED** *OK*  
 Secretary of State  
 State of California

**OCT 04 2017**

*mp* This Space For Office Use Only *Just*

- 1. Corporate Name** (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)

Lead Express, Inc.

- 2. 7-Digit Secretary of State File Number**      **3. Jurisdiction** (State, foreign country or place where this corporation is formed.)

C3606656

Nevada

- 4. Mailing Address to mail copies of Legal Service** (Enter the complete mailing address where the California Secretary of State may forward copies of any legal documents against the corporation that are served on the Secretary of State intended for the corporation.)

Mailing Address of Corporation	City (no abbreviations)	State	Zip Code
101 Convention Center Dr Suite 500	Las Vegas	NV	89109

- 5. Required Statements** (Do not alter the Required Statements – ALL must be true to file this Certificate of Surrender.)

Statements 5(a) – 5(d) are true:

- a) The corporation hereby surrenders its rights and authority to transact intrastate business in the State of California.
- b) The corporation hereby revokes its designation of agent for service of process in California.
- c) The corporation consents to process against it in any action upon any liability or obligation incurred within the State of California prior to the filing of this Certificate of Surrender may be served upon the California Secretary of State.
- d) All final returns required under the California Revenue and Taxation Code have been or will be filed with the California Franchise Tax Board.

- 6. Read and Sign Below** (See Instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

Signature

Keishi Ikeda, Secretary

Type or Print Name


SURC (REV 01/2017)

Clear Form

Print Form

2017 California Secretary of State  
[www.sos.ca.gov/business/be](http://www.sos.ca.gov/business/be)

4258198

	<p><b>Secretary of State</b>  <b>Statement and Designation by</b>  <b>Foreign Corporation</b></p>	<p><b>S&amp;DC-S/N</b></p>
<p><b>IMPORTANT — Read instructions before completing this form.</b></p> <p>Must be submitted with a current <b>Certificate of Good Standing</b> issued by the government agency where the corporation was formed. See instructions.</p> <p><b>Filing Fee</b> — \$100.00 (for a foreign stock corporation) or  \$30.00 (for a foreign nonprofit corporation)</p> <p><b>Copy Fees</b> — First page \$1.00; each attachment page \$0.50;  Certification Fee — \$5.00</p> <p><i>Note:</i> Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <a href="https://www.ftb.ca.gov">https://www.ftb.ca.gov</a>.</p>		
		<p><b>FILED</b></p> <p><b>Secretary of State</b>  <b>State of California</b></p> <p><b>MAR 22 2019</b></p>
		<p><i>1Pc</i></p> <p><b>This Space For Office Use Only</b></p>

**1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-availability](http://www.sos.ca.gov/business/be/name-availability) for general corporate name requirements and restrictions.)

**2. Jurisdiction** (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

<p>Lead Express, Inc.</p>	<p>Nevada</p>
---------------------------	---------------

**3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

<p>a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box</p> <p>2780 South Jones Blvd Suite 200-3637</p>	<p>City (no abbreviations)</p> <p>Las Vegas</p>	<p>State</p> <p>NV</p>	<p>Zip Code</p> <p>89146</p>
<p>b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box</p>	<p>City (no abbreviations)</p>	<p>State</p> <p>CA</p>	<p>Zip Code</p>
<p>c. Mailing Address of Principal Executive Office, if different than Item 3a</p>	<p>City (no abbreviations)</p>	<p>State</p>	<p>Zip Code</p>

**4. Service of Process** (Must provide either Individual OR Corporation.)

**INDIVIDUAL** — Complete Items 4a and 4b only. Must include agent's full name and California street address.

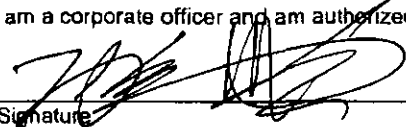
<p>a. California Agent's First Name (if agent is not a corporation)</p>	<p>Middle Name</p>	<p>Last Name</p>	<p>Suffix</p>
<p>b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box</p>	<p>City (no abbreviations)</p>	<p>State</p> <p>CA</p>	<p>Zip Code</p>

**CORPORATION** — Complete Item 4c. Only include the name of the registered agent Corporation.

<p>c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete Item 4a or 4b</p> <p>Business Filings Incorporated</p>
---

**5. Read and Sign Below** (See instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

 Signature	Takehisa Naito, President Type or Print Name
--	---

S&DC-S/N (REV 03/2017)

Clear Form

Print Form

2017 California Secretary of State  
[www.sos.ca.gov/business/be](http://www.sos.ca.gov/business/be)

4258198

## SECRETARY OF STATE

CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **LEAD EXPRESS, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 25, 2011, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 21, 2019.

A handwritten signature in cursive script that reads "Barbara K. Cegavske".

Barbara K. Cegavske  
Secretary of State

Electronic Certificate  
Certificate Number: C20190321-0435



# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**G588176**

**FILED**

In the office of the Secretary of State  
of the State of California

**APR-19 2019**

**1. CORPORATE NAME**

LEAD EXPRESS, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258198

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE  
2780 SOUTH JONES BLVD SUITE 200-3637, LAS VEGAS, NV 89146

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE  
TAKEHISA NAITO 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146

8. SECRETARY ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
BUSINESS CONSULTING

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

04/19/2019

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**GC31537**

**FILED**

In the office of the Secretary of State  
of the State of California

**JAN-17 2020**

**1. CORPORATE NAME**

LEAD EXPRESS, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258198

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to **Item 13**.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE  
2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS,, NV 89146

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE  
TAKEHISA NAITO 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146

8. SECRETARY ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
BUSINESS CONSULTING

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

01/17/2020

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

# **ATTACHMENT B**

# Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

**ABOVE SPACE IS FOR OFFICE USE ONLY**

PX19 - 62



**(PROFIT) INITIAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:**

CAMEL COINS, INC.

FILE NUMBER

E0157522012-8

NAME OF CORPORATION

FOR THE FILING PERIOD OF 3/2012 TO 3/2013

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is



\*100101\*

**BUSINESS FILINGS INCORPORATED (Commercial Registered Agent)**  
 311 S DIVISION ST  
 CARSON CITY, NV 89703 USA

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number <b>20120776365-09</b> Filing Date and Time <b>11/16/2012 10:44 AM</b> Entity Number <b>E0157522012-8</b>
--	---

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED**
- If there are additional officers, attach a list of them to this form
- Initial list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by the last day of the first month following the incorporation/initial registration with this office
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline
- Make your check payable to the Secretary of State
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708
- Form must be in the possession of the Secretary of State on or before the last day of the first month following the initial registration date. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include initial list and business license fees will result in rejection of filing.

INITIAL LIST FILING FEE \$125.00 LATE PENALTY \$75.00 BUSINESS LICENSE FEE \$200.00 LATE PENALTY \$100.00

**CHECK ONLY IF APPLICABLE**

- ☐ Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code: \_\_\_\_\_
- ☐ Month and year your State Business License expires: \_\_\_\_\_ 20 \_\_\_\_\_
- ☐ This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_
- ☐ This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity  
 002 - 501(c) Nonprofit Entity  
 003 - Home-based Business  
 004 - Natural Person with 4 or less rental dwelling units  
 005 - Motion Picture Company  
 006 - NRS 680B.020 Insurance Co.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 1619 N LA BREA AVE #514 , USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
NAME TAKEHISA NAITO	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 1619 N LA BREA AVE #514 , USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
NAME TAKEHISA NAITO	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 1619 N LA BREA AVE #514	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR		
ADDRESS 1619 N LA BREA AVE #514 , USA	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X TAKEHISA NAITO

Title Date  
 PRESIDENT 11/16/2012 10:37:54 AM

Signature of Officer

Nevada Secretary of State Initial List Profit  
 Revised 8-5-09

PX19 - 63



**(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:**

FILE NUMBER

CAMEL COINS, INC.  
NAME OF CORPORATION

E0157522012-8

FOR THE FILING PERIOD OF MAR, 2013 TO MAR, 2014

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

BUSINESS FILINGS INCORPORATED  
311 S DIVISION ST  
CARSON CITY, NV 89703A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number
	20130246132-84
	Filing Date and Time
	04/12/2013 4:09 PM
	Entity Number
	E0157522012-8

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.☐ This corporation is a publicly traded corporation. The Central Index Key number is: 

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co

☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 550 N FIGUEROA ST, #4077 , USA	CITY LOS ANGELES	STATE CA	ZIP CODE 90012
NAME TAKEHISA NAITO	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 550 N FIGUEROA ST, #4077 , USA	CITY LOS ANGELES	STATE CA	ZIP CODE 90012
NAME TAKEHISA NAITO	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 550 N FIGUEROA ST, #4077 , USA	CITY LOS ANGELES	STATE CA	ZIP CODE 90012
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR		
ADDRESS 550 N FIGUEROA ST, #4077 , USA	CITY LOS ANGELES	STATE CA	ZIP CODE 90012

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**X**

Title

PRESIDENT

Date

4/12/2013 4:08 52 PM

Signature of Officer

Nevada Secretary of State Annual List Profit  
Revised 3-9-12

**(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND  
STATE BUSINESS LICENSE APPLICATION OF:**

FILE NUMBER

CAMEL COINS, INC.  
NAME OF CORPORATION

E0157522012-8

FOR THE FILING PERIOD OF MAR, 2013 TO MAR, 2014**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is

**BUSINESS FILINGS INCORPORATED**  
311 S DIVISION ST  
CARSON CITY, NV 89703A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number
	<b>20130323290-35</b>
	Filing Date and Time
	<b>05/15/2013 10:22 AM</b>
	Entity Number
	<b>E0157522012-8</b>

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

- 1 Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- 2 If there are additional officers, attach a list of them to this form.
- 3 Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- 4 State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- 5 Make your check payable to the Secretary of State.
- 6 **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- 7 Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- 8 Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- ☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:  **NRS 76.020 Exemption Codes**  
 NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.  
☐ This corporation is a publicly traded corporation. The Central Index Key number is:   
☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS <b>550 N FIGUEROA ST, #4077, USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90012</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS <b>136 S. BROADWAY, USA</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90277</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS <b>550 N FIGUEROA ST, #4077, USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90012</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS <b>550 N FIGUEROA ST, #4077, USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90012</b>

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**X**

Signature of Officer

Title	Date
<b>PRESIDENT</b>	<b>5/15/2013 10:22:35 AM</b>

Nevada Secretary of State Annual List Profit  
Revised 3-9-12

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**CAMEL COINS, INC.  
NAME OF CORPORATION

ENTITY NUMBER

E0157522012-8

FOR THE FILING PERIOD OF 2014 TO 2015

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***


- ☒
- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ABOVE SPACE IS FOR OFFICE USE ONLY

Filed in the office of

  
 Ross Miller  
 Secretary of State  
 State of Nevada

Document Number

20140058415-30

Filing Date and Time

01/27/2014 5:54 AM

Entity Number

E0157522012-8

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- ☐
- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:
- 

**NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B 020 Insurance Co.

- ☐
- This corporation is a publicly traded corporation. The Central Index Key number is:
- 

- ☐
- This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS <b>1619 N. LA BREA AVE., #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS <b>136 S. BROADWAY</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90277</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS <b>136 S. BROADWAY</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90277</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS <b>1619 N. LA BREA AVE., #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X**  
 Signature of Officer or  
 Other Authorized Signature

Title

TREASURER

Date

1/22/2014

Nevada Secretary of State List Profit  
Revised 7-31-13



**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

CAMEL COINS, INC.

NAME OF CORPORATION

E0157522012-8

FOR THE FILING PERIOD OF **MAR, 2015** TO **MAR, 2016**

\*100102\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvssilverflume.gov](http://www.nvssilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form1 Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2 If there are additional officers, attach a list of them to this form.

3 Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4 State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5 Make your check payable to the Secretary of State.

6 **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7 Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8 Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS <b>1619 N LABREA AVE #614 , USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS <b>136 S. BROADWAY , USA</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90277</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS <b>136 S. BROADWAY , USA</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90277</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS <b>1619 N LABREA AVE #614 , USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITOTitle  
**CFO**Date  
**2/18/2015 3:33:04 PM****Signature of Officer or  
Other Authorized Signature**Nevada Secretary of State List Profit  
Revised 1-5-15

PX19 - 67

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

CAMEL COINS, INC.

E0157522012-8

NAME OF CORPORATION

FOR THE FILING PERIOD OF **MAR, 2016** TO **MAR, 2017**

\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- ☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- ☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

**NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- ☐ This corporation is a publicly traded corporation. The Central Index Key number is:
- ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	
ADDRESS <b>1619 N LABREA AVE #614 , USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	
ADDRESS <b>136 S. BROADWAY , USA</b>	CITY <b>REDONDO BEACH</b>	STATE <b>CA</b>	ZIP CODE <b>90277</b>
NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	
ADDRESS <b>1619 N LABREA AVE #614 , USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>DIRECTOR</b>	
ADDRESS <b>1619 N LABREA AVE #614 , USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

**Signature of Officer or  
Other Authorized Signature**

Title  
**TAKEHISA NAITO**

Date  
**2/16/2016 8:07:21 AM**

Nevada Secretary of State List Profit  
Revised 7-1-15

PX19 - 68

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

CAMEL COINS, INC.

E0157522012-8

NAME OF CORPORATION

FOR THE FILING PERIOD OF **MAR, 2017** TO **MAR, 2018**

\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- ☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number <b>20170113976-57</b>
	Filing Date and Time <b>03/16/2017 9:49 AM</b>
	Entity Number <b>E0157522012-8</b>

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- ☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co

**NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- ☐ This corporation is a publicly traded corporation. The Central Index Key number is:

- ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	
ADDRESS <b>1930 WILSHIRE BLVD, SUITE 400, USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90057</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	
ADDRESS <b>1930 WILSHIRE BLVD, SUITE 400, USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90057</b>
NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	
ADDRESS <b>1930 WILSHIRE BLVD, SUITE 400, USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90057</b>
NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>DIRECTOR</b>	
ADDRESS <b>1930 WILSHIRE BLVD, SUITE 400, USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90057</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

Signature of Officer or  
Other Authorized Signature

Title **PRESIDENT** Date **3/16/2017 9:49:18 AM**

Nevada Secretary of State List Profit  
Revised: 7-1-15

PX19 - 69



**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

CAMEL COINS, INC.

NAME OF CORPORATION

ENTITY NUMBER

E0157522012-8

FOR THE FILING PERIOD OF **MAR, 2017** TO **MAR, 2018**

\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number <b>20170241626-31</b> Filing Date and Time <b>06/02/2017 10:47 AM</b> Entity Number <b>E0157522012-8</b>
--	---

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes**

- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

**NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	
ADDRESS <b>1619 N. LA BREA AVE, APT. #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>DIRECTOR</b>	
ADDRESS <b>1619 N. LA BREA AVE, APT. #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITOSignature of Officer or  
Other Authorized Signature

Title <b>PRESIDENT</b>	Date <b>6/2/2017 10:47:34 AM</b>
---------------------------	-------------------------------------

Nevada Secretary of State List Profit  
Revised: 7-1-15

PX19 - 70

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS  
LICENSE APPLICATION OF:**

CAMEL COINS, INC.

NAME OF CORPORATION

ENTITY NUMBER

E0157522012-8

FOR THE FILING PERIOD OF **MAR, 2018** TO **MAR, 2019**

\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number <b>20180059905-69</b> Filing Date and Time <b>02/07/2018 6:51 AM</b> Entity Number <b>E0157522012-8</b>
--	--

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

001 - Governmental Entity

006 - NRS 680B.020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	
ADDRESS <b>1619 N. LA BREA AVE, APT. #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>DIRECTOR</b>	
ADDRESS <b>1619 N. LA BREA AVE, APT. #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO**Signature of Officer or  
Other Authorized Signature**

Title <b>PRESIDENT</b>	Date <b>2/7/2018 6:51:57 AM</b>
---------------------------	------------------------------------

Nevada Secretary of State List Profit  
Form 100103 Revised: 7-1-17

PX19 - 71



**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

CAMEL COINS, INC.

NAME OF CORPORATION

ENTITY NUMBER

E0157522012-8

FOR THE FILING PERIOD OF **MAR, 2019** TO **MAR, 2020**

\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

001 - Governmental Entity

006 - NRS 680B.020 Insurance Co

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME

TAKEHISA NAITO

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

ADDRESS

2780 SOUTH JONES BLVD. SUITE 200-3132

CITY

LAS VEGAS

STATE

NV

ZIP CODE

89146

NAME

KEISHI IKEDA

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

ADDRESS

2780 SOUTH JONES BLVD. SUITE 200-3132

CITY

LAS VEGAS

STATE

NV

ZIP CODE

89146

NAME

KEISHI IKEDA

TITLE(S)

TREASURER (OR EQUIVALENT OF)

ADDRESS

2780 SOUTH JONES BLVD. SUITE 200-3132

CITY

LAS VEGAS

STATE

NV

ZIP CODE

89146

NAME

TAKEHISA NAITO

TITLE(S)

DIRECTOR

ADDRESS

2780 SOUTH JONES BLVD. SUITE 200-3132

CITY

LAS VEGAS

STATE

NV

ZIP CODE

89146

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

Title

PRESIDENT

Date

2/26/2019 3:02:29 PM

Signature of Officer or  
Other Authorized SignatureNevada Secretary of State List Profit  
Form 100103 Revised: 7-1-17

PX19 - 72

3425801

## ARTICLES OF INCORPORATION

### Article I

The name of the corporation is: Camel Coins

**FILED**  
In the office of the Secretary of State  
of the State of California

NOV 08 2011

### Article II

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

### Article III

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is five thousand (5,000), with a one dollar (\$1.00) par value per share.

### Article IV

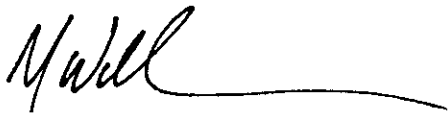
The name in the State of California of this corporation's initial agent for service of process is:

Business Filings Incorporated

### Article V

The liability of the directors of the corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

Business Filings Incorporated, Incorporator



BY: Mark Williams, A.V.P.



# State of California

## Secretary of State

S

E-H54922

FILED

In the office of the Secretary of  
State of the State of California

Nov - 30 2011

This Space For Filing Use Only

### Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

**FEES (Filing and Disclosure): \$25.00. If amendment, see instructions.**  
**IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

## 1. CORPORATE NAME

C3425801  
CAMEL COINS

## Due Date:

## Complete Addresses for the Following (Do not abbreviate the name of the city. Items 2 and 3 cannot be P.O. Boxes.)

2. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
1930 WILSHIRE BLVD. SUITE 400 LOS ANGELES CA 90057			
3. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
1930 WILSHIRE BLVD. SUITE 400 LOS ANGELES CA 90057			
4. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 2	CITY	STATE	ZIP CODE

## Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

5. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	6260 W 3RD ST. #407	LOS ANGELES, CA	90036	
6. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	6260 W 3RD ST. #407	LOS ANGELES, CA	90036	
7. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	6260 W 3RD ST. #407	LOS ANGELES, CA	90036	

## Names and Complete Addresses of All Directors, Including Directors Who Are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)

8. NAME	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	6260 W 3RD ST. #407	LOS ANGELES, CA	90036	
9. NAME	ADDRESS	CITY	STATE	ZIP CODE
10. NAME	ADDRESS	CITY	STATE	ZIP CODE

## 11. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** (If the agent is an individual, the agent must reside in California and Item 13 must be completed with a California street address (a P.O.Box address is not acceptable). If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 13 must be left blank.)

## 12. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED

13. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE

## Type of Business

## 14. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

MR. NAITO HAS EXPERIENCE IN FI

## 15. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

11/30/2011

DATE

TAKEHISA NAITO

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

PRESIDENT

TITLE

SIGNATURE



# State of California Secretary of State

## Domestic Stock Corporation Certificate of Dissolution

DISS STK

D1187451

FILED

 Secretary of State  
State of California

MAY 13 2013

There is no fee for filing a Certificate of Dissolution.

IMPORTANT - Read instructions before completing this form.

This Space For Filing Use Only

Corporate Name (Enter the name of the domestic stock corporation exactly as it is of record with the California Secretary of State.)

1. Name of corporation.

CAMEL COINS:

Required Statements (The following statements are required by statute and should not be altered.)

2. A final franchise tax return, as described by California Revenue and Taxation Code section 23332, has been or will be filed with the California Franchise Tax Board, as required under the California Revenue and Taxation Code, Division 2, Part 10.2 (commencing with Section 18401). The corporation has been completely wound up and is dissolved.

Debts &amp; Liabilities (Check the applicable statement. Note: Only one box may be checked.)

3. ☒ The corporation's known debts and liabilities have been actually paid.☐ The corporation's known debts and liabilities have been paid as far as its assets permitted.☐ The corporation's known debts and liabilities have been adequately provided for by their assumption and the name and address of the assumer is \_\_\_\_\_☐ The corporation's known debts and liabilities have been adequately provided for as far as its assets permitted.

(Specify in an attachment to this certificate (incorporated herein by this reference) the provision made and the address of the corporation, person or governmental agency that has assumed or guaranteed the payment, or the name and address of the depository with which deposit has been made or other information necessary to enable creditors or others to whom payment is to be made to appear and claim payment.)

☐ The corporation never incurred any known debts or liabilities.

Assets (Check the applicable statement. Note: Only one box may be checked.)

4. ☒ The known assets have been distributed to the persons entitled thereto.☐ The corporation never acquired any known assets.

Election (Check the "YES" or "NO" box, as applicable. Note: If the "NO" box is checked, a Certificate of Election to Wind Up and Dissolve pursuant to Corporations Code section 1801 must be filed prior to or together with this Certificate of Dissolution.)

5. The election to dissolve was made by the vote of all the outstanding shares. ☒ YES ☐ NO

Verification &amp; Execution (If additional signature space is necessary, the dated signature(s) with verification(s) may be made on an attachment to this certificate. Any attachments to this certificate are incorporated herein by this reference.)

6. The undersigned constitute(s) the sole director or a majority of the directors now in office. I declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of my own knowledge.

4/29/2013

Date

Signature of Director

Takehisa Naito

Type or Print Name of Director

Signature of Director

Type or Print Name of Director

Signature of Director

Type or Print Name of Director

DISS STK (REV 01/2013)

APPROVED BY SECRETARY OF STATE

3606651

FILED

IN THE OFFICE OF THE  
SECRETARY OF STATE  
OF THE STATE OF CALIFORNIA

1PC SEP 25 2013

S&amp;DC-S/N

Statement and Designation by  
Foreign Corporation

To qualify a corporation from another state or country to transact intrastate business in California, fill out this form, and submit for filing along with:

- A \$100 filing fee (for a foreign stock corporation) or \$30 filing fee (for a foreign nonprofit corporation), and
- A certificate of good standing, issued within the last six (6) months by the agency where the corporation was formed. **Note:** If the corporation is a nonprofit, the certificate of good standing also must indicate the corporation is a nonprofit or nonstock corporation.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.

**Important!** Corporations in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board. For more information, go to <https://www.ftb.ca.gov>.

This Space For Office Use Only

For questions about this form, go to [www.sos.ca.gov/business/be/filing-tips.htm](http://www.sos.ca.gov/business/be/filing-tips.htm).

**Corporate Name** (List the exact name of the corporation, as shown in the certificate of good standing. If the name of the corporation is not available for use in the State of California, the corporation must qualify under an assumed name. E.g., "[list the exact name] which will do business in California as [list the proposed assumed name]." For general corporate name requirements and restrictions in California, go to [www.sos.ca.gov/business/be/name-availability.htm](http://www.sos.ca.gov/business/be/name-availability.htm).)

① CAMEL COINS, INC.

## Corporate History

② State or foreign country where this corporation was formed: Nevada

**Service of Process** (List a California resident or an active 1505 corporation in California that agrees to be your agent to accept service of process in case your corporation is sued. You may list any adult who lives in California. You may **not** list your own corporation as the agent. **Do not** list an address if the agent is a 1505 corporation.)

③ a. Business Filings Incorporated

Agent's Name

b.

Agent's Street Address (if agent is not a corporation)

City (no abbreviations)

CA

State Zip

The corporation named in Item 1 above irrevocably consents to service of process directed to it upon the agent designated above, and to service of process on the California Secretary of State if that agent or that agent's successor is no longer authorized to act or cannot be found at the address given.

## Corporate Addresses

④ a. 2780 S. Jones Blvd #3695, Las Vegas, Nevada 89146

Street Address of Principal Executive Office

City (no abbreviations)

State Zip

b.

Street Address of Principal Office in California, if any

City (no abbreviations)

CA

State Zip

c.

Mailing Address of Principal Executive Office, if different from 4a or 4b

City (no abbreviations)

State Zip

**Read and sign below:** This form must be signed by an officer of the foreign corporation.



Takehisa Naito

President

Sign here

Print your name here

Your business title

Make check/money order payable to: **Secretary of State**

Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

**By Mail**

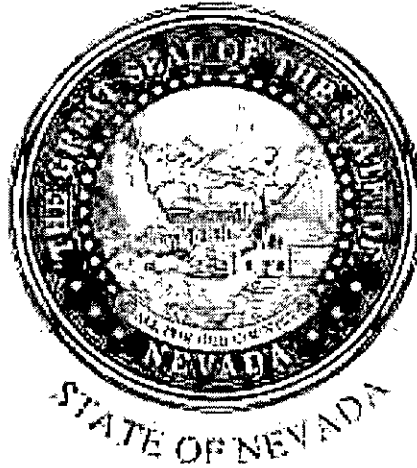
Secretary of State  
Business Entities, P.O. Box 944260  
Sacramento, CA 94244-2600

**Drop-Off**

Secretary of State  
1500 11th Street, 3rd Floor  
Sacramento, CA 95814

SECRETARY OF STATE

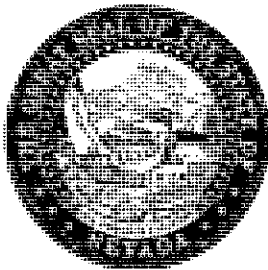
3606651




## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CAMEL COINS, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since March 19, 2012, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 23, 2013.

  
ROSS MILLER  
Secretary of State

Electronic Certificate  
Certificate Number: C20130923-1749  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>





# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

**If this is an amendment, see instructions.**

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**1. CORPORATE NAME**

**2. CALIFORNIA CORPORATE NUMBER**

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to **Item 13**.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 78



# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**FX86890**

**FILED**

In the office of the Secretary of State  
of the State of California

**JUL-06 2018**

**1. CORPORATE NAME**

CAMEL COINS, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C3606651

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE  
2780 S. JONES BLVD #3695, LAS VEGAS, NV 89146

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE  
TAKEHISA NAITO 1619 N. LA BREA AVE, APT. #614, HOLLYWOOD, CA 90028

8. SECRETARY ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 8760 W. PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 8760 W. PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
BUSINESS CONSULTING

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

07/06/2018

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE





# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**GA97645**

**FILED**

In the office of the Secretary of State  
of the State of California

**NOV-25 2019**

**1. CORPORATE NAME**

CAMEL COINS, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C3606651

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☒ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

11/25/2019

KEISHI IKEDA

CFO

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 80


# **ATTACHMENT C**



ROSS MILLER  
Secretary of State  
204 North Carson Street, Suite 4  
Carson City, Nevada 89701-4520  
(775) 684 5708  
Website: www.nvsos.gov

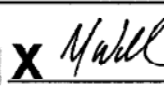
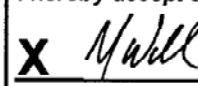
## Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

Filed in the office of	Document Number
	20120116859-95
Ross Miller Secretary of State State of Nevada	Filing Date and Time 02/21/2012 8:00 AM
	Entity Number E0097152012-0

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Corporation:</b>	Sea Mirror, Inc.		
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: Business Filings Incorporated Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below) Name of Noncommercial Registered Agent <b>OR</b> Name of Title of Office or Other Position with Entity Street Address City Nevada Zip Code Mailing Address (if different from street address) City Nevada Zip Code		
<b>3. Authorized Stock:</b> (number of shares corporation is authorized to issue)	Number of shares with par value: 2000	Par value per share: \$ 0.01	Number of shares without par value:
<b>4. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) Takehisa Naito Name 2780 S. Jones Blvd, Suite 200 #3692 Las Vegas Nevada 89146 Street Address City State Zip Code 2) _____ Name Street Address City State Zip Code		
<b>5. Purpose:</b> (optional; see instructions)	The purpose of the corporation shall be: To engage in any lawful act or activity for which a corporation may be organized under Chapter 78 of NRS.		
<b>6. Name, Address and Signature of Incorporator:</b> (attach additional page if more than one incorporator)	Business Filings Incorporated <b>X</b>  Mark Williams, AVP Name Incorporator Signature 8040 Excelsior Dr., Ste 200 Madison WI 53717 Address City State Zip Code		
<b>7. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity. Mark Williams, AVP, Business Filings Incorporated <b>X</b>  Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity February 20, 2012 Date		

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 78 Articles  
Revised: 4-10-09

Case 2:29-cv-00840-LAD-NJK Document 3-6 Filed 05/11/20 Page 84 of 149

**(PROFIT) INITIAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND  
STATE BUSINESS LICENSE APPLICATION OF:**

FILE NUMBER

SEA MIRROR, INC.

E0097152012-0

NAME OF CORPORATION

FOR THE FILING PERIOD OF 2/2012 TO 2/2013



\*100101\*

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

BUSINESS FILINGS INCORPORATED (Commercial Registered Agent)  
311 S DIVISION ST  
CARSON CITY, NV 89703 USA

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: [www.nvsos.gov](http://www.nvsos.gov)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number
	20120123225-80
	Filing Date and Time
	02/22/2012 3:06 PM
	Entity Number
	E0097152012-0

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Initial list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by the last day of the first month following the incorporation/initial registration with this office.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the first month following the initial registration date. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include initial list and business license fees will result in rejection of filing.

INITIAL LIST FILING FEE: \$125.00

LATE PENALTY: \$75.00

BUSINESS LICENSE FEE: \$200.00

LATE PENALTY: \$100.00

**CHECK ONLY IF APPLICABLE**

- ☐ Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code: \_\_\_\_\_
- ☐ Month and year your State Business License expires: \_\_\_\_\_ 20 \_\_\_\_\_
- ☐ This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_
- ☐ This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity  
002 - 501(c) Nonprofit Entity  
003 - Home-based Business  
004 - Natural Person with 4 or less rental dwelling units  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)
ADDRESS 2780 S. JONES BLVD. SUITE200 #3692	CITY LAS VEGAS
	STATE NV
	ZIP CODE 89146
NAME TAKEHISA NAITO	TITLE(S) SECRETARY (OR EQUIVALENT OF)
ADDRESS 2780 S. JONES BLVD. SUITE200 #3692	CITY LAS VEGAS
	STATE NV
	ZIP CODE 89146
NAME TAKEHISA NAITO	TITLE(S) TREASURER (OR EQUIVALENT OF)
ADDRESS 2780 S. JONES BLVD. SUITE200 #3692	CITY LAS VEGAS
	STATE NV
	ZIP CODE 89146
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR
ADDRESS 2780 S. JONES BLVD. SUITE200 #3692	CITY LAS VEGAS
	STATE NV
	ZIP CODE 89146

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X TAKEHISA NAITO

Title

PRESIDENT

Date

2/22/2012 2:59:49 PM

Signature of Officer

Nevada Secretary of State Initial List Profit  
Revised: 8-5-09

**(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND  
STATE BUSINESS LICENSE APPLICATION OF:****SEA MIRROR, INC.**

NAME OF CORPORATION

**E0097152012-0**


FILE NUMBER

**FOR THE FILING PERIOD OF 2013 TO 2014. DUE BY 2/28/2013****File list with the NEVADA SECRETARY OF STATE****\*\*\* YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov) \*\*\***

The entity's duly appointed agent in the state of NEVADA upon whom process can be served is:

**BUSINESS FILINGS INCORPORATED****311 S DIVISION ST****CARSON CITY NV 89703**

Filed in the office of

  
 Ross Miller  
 Secretary of State  
 State of Nevada

Document Number

**20130111213-15**

Filing Date and Time

**02/19/2013 5:47 AM**

Entity Number

**E0097152012-0****ABOVE SPACE IS FOR OFFICE USE ONLY**☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT: Read instructions before completing and returning this form**

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED. USE BLACK INK ONLY - DO NOT HIGHLIGHT
2. If there are additional officers, attach a list of them to this form.
3. Return the complete form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State Business License fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS, this entity is exempt from the business license fee. Exemption Code: **NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co.

**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

ANNUAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00		BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00	
NAME: <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS: <b>2780 S. JONES BLVD. SUITE200 #3692</b>	CITY: <b>LAS VEGAS</b>	ST: <b>NV</b>	ZIP: <b>89146</b>
NAME: <b>TAKEHISA NAITO</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS: <b>2780 S. JONES BLVD. SUITE200 #3692</b>	CITY: <b>LAS VEGAS</b>	ST: <b>NV</b>	ZIP: <b>89146</b>
NAME: <b>TAKEHISA NAITO</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS: <b>2780 S. JONES BLVD. SUITE200 #3692</b>	CITY: <b>LAS VEGAS</b>	ST: <b>NV</b>	ZIP: <b>89146</b>
NAME: <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS: <b>2780 S. JONES BLVD. SUITE200 #3692</b>	CITY: <b>LAS VEGAS</b>	ST: <b>NV</b>	ZIP: <b>89146</b>

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X**

Signature of Officer

Title

**C.E.O.**

Date

**1/22/13**

Nevada Secretary of State Annual List Profit Revised: 3-15-12






ROSS MILLER  
Secretary of State  
204 North Carson Street, Suite 1  
Carson City, Nevada 89701-4520  
(775) 684 5708  
Website: [www.nvsos.gov](http://www.nvsos.gov)

## Certificate of Dissolution

(PURSUANT TO NRS 78.575)

Filed in the office of 	Document Number <b>20130241620-91</b>
Ross Miller Secretary of State State of Nevada	Filing Date and Time <b>04/08/2013 8:03 AM</b>
	Entity Number <b>E0097152012-0</b>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

### Certificate of Dissolution For a Nevada Profit Corporation Before Payment of Capital and Beginning of Business (Pursuant to NRS 78.575)

*The undersigned certify that the following information is correct:*

1. Name of corporation:

Sea Mirror, Inc.

2. No part of the capital has been paid.

3. Business has not begun.

4. The undersigned comprise a majority of the incorporators or of the board of directors.

5. The undersigned incorporators or directors\* desire to dissolve said corporation:

Takehisa Naito, Director

Name of incorporator or director

**X**  
Signature

Name of incorporator or director

**X**  
Signature

Name of incorporator or director

**X**  
Signature

\*attach a plain 8 1/2" x 11" sheet to list additional incorporators or directors.

**FILING FEE: \$75.00**

**IMPORTANT:** Failure to include any of the above information and submit with the proper fees may cause this filing to be rejected.

*This form must be accompanied by appropriate fees.*

Nevada Secretary of State Dissolution Profit-Before  
Revised: 3-6-09





BARBARA K. CEGAVSKE  
Secretary of State  
202 North Carson Street  
Carson City, Nevada 89701-4201  
(775) 684-5708  
Website: [www.nvsos.gov](http://www.nvsos.gov)



\*040105\*

## Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

Filed in the Office of <i>Barbara K. Cegavske</i>	Business Number E0488742018-0
Secretary State Of Nevada	Filing Number 20180454187-40
	Filed On 10/17/2018
	Number of Pages 1

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Corporation:</b>	Sea Mirror, Inc.			
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: Business Filings Incorporated Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below) Name of Noncommercial Registered Agent <b>OR</b> Name of Title of Office or Other Position with Entity Street Address City Nevada Zip Code Mailing Address (if different from street address) City Nevada Zip Code			
<b>3. Authorized Stock:</b> (number of shares corporation is authorized to issue)	Number of shares with par value: 2,000	Par value per share: \$ 0.01	Number of shares without par value:	
<b>4. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) Takehisa Naito Name 2780 South Jones Boulevard, Suite 200-3132 Las Vegas NV 89109 Street Address City State Zip Code 2) _____ Name Street Address City State Zip Code			
<b>5. Purpose:</b> (optional; required only if Benefit Corporation status selected)	The purpose of the corporation shall be: All Lawful Business		<b>6. Benefit Corporation:</b> (see instructions) <input type="checkbox"/> Yes	
<b>7. Name, Address and Signature of Incorporator:</b> (attach additional page if more than one incorporator)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. Takehisa Naito Name 2780 South Jones Boulevard, Suite 200-3133 Las Vegas NV 89109 Address City State Zip Code			
<b>8. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity. <input checked="" type="checkbox"/> <i>Mark Williams</i> Mark Williams, AVP Business Filings Incorporated Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date 09/10/2018			

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 78 Articles  
Revised: 1-5-15



\*140503\*



BARBARA K. CEGAVSKE  
 Secretary of State  
 202 North Carson Street  
 Carson City, Nevada 89701-4201  
 (775) 684-5708  
 Website: www.nvsos.gov

## Articles of Domestication

(PURSUANT TO NRS 92A.270)

Filed in the Office of <i>Barbara K. Cegavske</i> Secretary State Of Nevada	Business Number
	E0488742018-0
	Filing Number
	20180454188-51
	Filed On
	10/17/2018
	Number of Pages
	1

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Entity Name and Type of Domestic Entity as set forth in its Constituent Documents:	Sea Mirror, Inc., Corporation
2. Entity Name Before Filing Articles of Domestication:	Sea Mirror, Inc.
3. Date and Jurisdiction of Original Formation:	02/08/2013, California
4. Jurisdiction that Constituted the Principal Place of Business, Central Administration or Equivalent of the Undomesticated Entity Immediately Before Articles of Domestication:	California
5. Signature of Authorized Representative:	<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <b>X</b>              Authorized Signature Takehisa Naito, President         </div> <div style="border: 1px solid black; padding: 2px;">           10/4/2018            Date         </div> </div>

Filing Fee: \$350.00

**IMPORTANT:** This document must be accompanied by the appropriate constituent document for the type of domestic entity described in article 1 above and the filing fees.

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 92A Domestication  
 Revised: 1-5-15

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

Sca Mirror, Inc.  
NAME OF CORPORATIONFOR THE FILING PERIOD OF 2018 TO 2019

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\* YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov) \*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

001 - Governmental Entity

006 - NRS 680B.020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME

Takehisa Naito

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

ADDRESS

2780 South Jones Boulevard, Suite 200-3132

CITY

Las Vegas

STATE

NV

ZIP CODE

89109

NAME

Keishi Ikeda

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

ADDRESS

2780 South Jones Boulevard, Suite 200-3133

CITY

Las Vegas

STATE

NV

ZIP CODE

89109

NAME

Keishi Ikeda

TITLE(S)

TREASURER (OR EQUIVALENT OF)

ADDRESS

2780 South Jones Boulevard, Suite 200-3133

CITY

Las Vegas

STATE

NV

ZIP CODE

89109

NAME

Takehisa Naito

TITLE(S)

DIRECTOR

ADDRESS

2780 South Jones Boulevard, Suite 200-3132

CITY

Las Vegas

STATE

NV

ZIP CODE

89109

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X

Signature of Officer or  
Other Authorized Signature

Title

President

Date

10-4-2018

Nevada Secretary of State List Profit  
Form: 100103 Revised: 7-1-17

3533409

**ARTICLES OF INCORPORATION**

**FILED**  
Secretary of State  
State of California

FEB 08 2013

**Article I**

The name of the corporation is: Sea Mirror, Inc.

**Article II**

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

**Article III**

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is two thousand (2,000), with a one cent (\$0.01) par value per share.

**Article IV**

The name in the State of California of this corporation's initial agent for service of process is:

Business Filings Incorporated

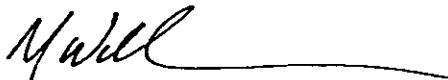
**Article V**

The initial business and mailing address of the corporation is: 1150 South Olive St. Suite 2000, Los Angeles, California 90015

**Article VI**

The liability of the directors of the corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

Business Filings Incorporated, Incorporator



BY: Mark Williams, A.V.P.



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

E-R84123

FILED

In the office of the Secretary of  
State of the State of California

Apr - 11 2013

This Space For Filing Use Only

## 1. CORPORATE NAME

SEA MIRROR, INC.

1150 SOUTH OLIVE ST.

LOS ANGELES CA 90015

## 2. CALIFORNIA CORPORATE NUMBER C3533409

No Change Statement ( Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
1150 SOUTH OLIVE ST. SUITE 2000 LOS ANGELES CA 90015			

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
1150 SOUTH OLIVE ST. SUITE 2000 LOS ANGELES CA 90015			

6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	1150 SOUTH OLIVE ST. SUITE 2000	LOS ANGELES	CA	90015

8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	1150 SOUTH OLIVE ST. SUITE 2000	LOS ANGELES	CA	90015

9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	1150 SOUTH OLIVE ST. SUITE 2000	LOS ANGELES	CA	90015

Names and Complete Addresses of All Directors, Including Directors Who Are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	1150 SOUTH OLIVE ST. SUITE 2000	LOS ANGELES	CA	90015

11. NAME	ADDRESS	CITY	STATE	ZIP CODE

12. NAME	ADDRESS	CITY	STATE	ZIP CODE

## 13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O.Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

## 14. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE

## Type of Business

## 16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

BUSINESS CONSULTING

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

04/11/2013

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-200 (REV 01/2012)

APPROVED BY SECRETARY OF STATE

PX19 - 90

17-633638

 <b>Secretary of State</b> <b>Statement of Information</b> (California Stock, Agricultural Cooperative and Foreign Corporations)	<b>SI-550</b>
	47
<b>IMPORTANT</b> — Read instructions before completing this form.	
<b>Fees (Filing plus Disclosure) – \$25.00;</b>  <b>Copy Fees</b> – First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees	
<b>1. Corporation Name</b> (Enter the exact name of the corporation as it is currently recorded with the California Secretary of State)  Sea Mirror, Inc.	

**FILED**  
**Secretary of State**  
**State of California**

JUN 16 2017

1.50/NF/PL

This Space For Office Use Only

**2. 7-Digit Secretary of State File Number**  
 C3533409

**3. Business Addresses**

<b>a. Street Address of Principal Executive Office</b> - Do not list a P.O. Box 355 S. Grand Ave. Ste. 2450	<b>City</b> (no abbreviations) Los Angeles	<b>State</b> CA	<b>Zip Code</b> 90071
<b>b. Mailing Address of Corporation</b> , if different than item 3a	<b>City</b> (no abbreviations)	<b>State</b>	<b>Zip Code</b>
<b>c. Street Address of Principal California Office</b> , if any and if different than Item 3a - Do not list a P.O. Box	<b>City</b> (no abbreviations)	<b>State</b> CA	<b>Zip Code</b>

**4. Officers**

The Corporation is required to list all three of the officers set forth below. An additional title for the Chief Executive Officer and Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.

<b>a. Chief Executive Officer</b>	<b>First Name</b> Takehisa	<b>Middle Name</b>	<b>Last Name</b> Naito	<b>Suffix</b>
<b>Address</b> 1619 N. La Brea Ave #614	<b>City</b> (no abbreviations) Hollywood		<b>State</b> CA	<b>Zip Code</b> 90028
<b>b. Secretary</b>	<b>First Name</b> Keishi	<b>Middle Name</b>	<b>Last Name</b> Ikeda	<b>Suffix</b>
<b>Address</b> 8760 W. Patrick Lane Unit 2016	<b>City</b> (no abbreviations) Las Vegas		<b>State</b> NV	<b>Zip Code</b> 89148
<b>c. Chief Financial Officer</b>	<b>First Name</b> Keishi	<b>Middle Name</b>	<b>Last Name</b> Ikeda	<b>Suffix</b>
<b>Address</b> 8760 W. Patrick Lane Unit 2016	<b>City</b> (no abbreviations) Las Vegas		<b>State</b> NV	<b>Zip Code</b> 89148

**5. Director(s)**

California Stock and Agricultural Cooperative Corporations ONLY: Item 5a: At least one name and address must be listed. If the Corporation has additional directors, enter the name(s) and addresses on Form SI-550A (see instructions).

<b>a. First Name</b> Takehisa	<b>Middle Name</b>	<b>Last Name</b> Naito	<b>Suffix</b>
<b>Address</b> 1619 N. La Brea Ave #614	<b>City</b> (no abbreviations) Hollywood		<b>State</b> CA <b>Zip Code</b> 90028
<b>b. Number of Vacancies on the Board of Directors</b> , if any <input type="text"/>			

**6. Agent for Service of Process**

Item 6a and 6b: If the agent is an individual, the agent must reside in California and Item 6a and 6b must be completed with the agent's name and California address. Item 6c: If the agent is a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and Item 6c must be completed (leave Item 6a-6b blank).

<b>a. California Agent's First Name</b> (if agent is not a corporation)	<b>Middle Name</b>	<b>Last Name</b>	<b>Suffix</b>
<b>b. Street Address</b> (if agent is not a corporation) - Do not list a P.O. Box		<b>City</b> (no abbreviations)	<b>State</b> CA <b>Zip Code</b>
<b>c. California Registered Corporate Agent's Name</b> (if agent is a corporation) - Do not complete item 6a or 6b Business Filings Incorporated			

**7. Type of Business**

<b>Describe the type of business or services of the Corporation</b> Business Consulting
--

**8. The Information contained herein, including in any attachments, is true and correct.**

June 13, 2017

Takehisa Naito

President

Date

Type or Print Name of Person Completing the Form

Title

Signature

SI-550 (REV 11/2016)

 2016 California Secretary of State  
 www.sos.ca.gov/business/be

1/2

PX19 - 91



Statement of Information  
Sea Mirror, Inc.

4. Officers:

Vice President: Takehisa Naito, 1619 N. La Brea Ave #614, Hollywood, California 90028

President: Takehisa Naito, 1619 N. La Brea Ave #614, Hollywood, California 90028

Treasurer: Keishi Ikeda, 8760 W. Patrick Lane, Unit 2016, Las Vegas, Nevada 89148

Y2



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. **If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE


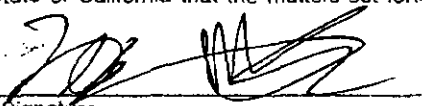
### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE TYPE/PRINT NAME OF PERSON COMPLETING FORM TITLE SIGNATURE

D1482627

	<b>Secretary of State</b> <b>Certificate of Dissolution</b> (California Stock Corporation ONLY)	<b>DISS STK</b>	<b>FILED</b> <i>NH</i> Secretary of State State of California <b>NOV 15 2018</b>  <i>192</i> This Space For Office Use Only
<b>IMPORTANT — Read Instructions before completing this form.</b> There is No Fee for filing a Certificate of Dissolution - Stock <b>Copy Fees</b> – First page \$1.00; each attachment page \$0.50. Certification Fee - \$5.00 plus copy fees			
<b>1. Corporate Name</b> (Enter the exact name of the Corporation as it is recorded with the California Secretary of State.)  Sea Mirror, Inc.		<b>2. 7-Digit Secretary of State File Number</b>  C3533409	
<b>3. Election</b> <input checked="" type="checkbox"/> The dissolution was made by a vote of <b>ALL</b> of the shareholders of the California corporation. <small>Note: If the above box is not checked, a Certificate of Election to Wind Up and Dissolve (Form ELEC STK) must be filed prior to or together with this Certificate of Dissolution. (California Corporations Code section 1301.)</small>			
<b>4. Debts and Liabilities</b> (Check the applicable statement. Only one box may be checked. If second box is checked, must include the required information in an attachment.) <input checked="" type="checkbox"/> The known debts and liabilities have been actually paid or paid as far as its assets permitted. <input type="checkbox"/> The known debts and liabilities have been adequately provided for in full or as far as its assets permitted by their assumption. Included in the <b>attachment</b> to this certificate, incorporated herein by this reference, is a description of the provisions made and the name and address of the person, corporation or government agency that has assumed or guaranteed the payment, or the depository institution with which deposit has been made. <input type="checkbox"/> The corporation never incurred any known debts or liabilities.			
<b>5. Required Statements</b> (Do not alter the Required Statements – ALL must be true to file Form DISS STK.) a. The Corporation has been completely wound up and is dissolved. b. All final returns required under the California Revenue and Taxation Code have been or will be filed with the California Franchise Tax Board. c. The known assets have been distributed to the persons entitled thereto or the corporation acquired no known assets.			
<b>6. Read, Verify, Date and Sign Below</b> (See Instructions for signature requirements.) The undersigned is the sole director or a majority of the directors now in office. I declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of my own knowledge.			
11/13/18 Date	 Signature	Takehisa Naito Type or Print Name	
_____ Date	_____ Signature	_____ Type or Print Name	
_____ Date	_____ Signature	_____ Type or Print Name	


DISS STK (REV 12/2016)

Clear Form

Print Form

2016 California Secretary of State  
www.sos.ca.gov/business/be

4258692

	<b>Secretary of State</b> <b>Statement and Designation by</b> <b>Foreign Corporation</b>	<b>S&amp;DC-S/N</b>
	<p><b>IMPORTANT — Read Instructions before completing this form.</b></p> <p>Must be submitted with a current <b>Certificate of Good Standing</b> issued by the government agency where the corporation was formed. See Instructions.</p> <p><b>Filing Fee</b> — \$100.00 (for a foreign stock corporation) or \$30.00 (for a foreign nonprofit corporation)</p> <p><b>Copy Fees</b> — First page \$1.00; each attachment page \$0.50; Certification Fee — \$5.00</p> <p><b>Note:</b> Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <a href="https://www.ftb.ca.gov">https://www.ftb.ca.gov</a>.</p>	

**FILED** *mc*  
**Secretary of State**  
**State of California**

MAR 25 2019

This Space For Office Use Only

**1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-availability](http://www.sos.ca.gov/business/be/name-availability) for general corporate name requirements and restrictions.)

**2. Jurisdiction** (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

Sea Mirror, Inc.	Nevada
------------------	--------

**3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
2780 South Jones Boulevard Suite 200-3692	Las Vegas	NV	89146
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
		CA	
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations)	State	Zip Code

**4. Service of Process** (Must provide either Individual OR Corporation.)

**INDIVIDUAL** - Complete Items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
		CA	

**CORPORATION** - Complete Item 4c. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 4a or 4b

Business Filings Incorporated

**5. Read and Sign Below** (See Instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

Signature

Takchisa Naito, President

Type or Print Name

S&amp;DC-S/N (REV 03/2017)

Clear Form

Print Form

2017 California Secretary of State  
[www.sos.ca.gov/business/be](http://www.sos.ca.gov/business/be)

4258692

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SEA MIRROR, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 17, 2018, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 22, 2019.

*Barbara K. Cegavske*

Barbara K. Cegavske  
Secretary of State

Electronic Certificate  
Certificate Number: C20190322-0030



# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**G588776**

**FILED**

In the office of the Secretary of State  
of the State of California

**APR-19 2019**

**1. CORPORATE NAME**

SEA MIRROR, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258692

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE  
2780 SOUTH JONES BOULEVARD SUITE 200-3692, LAS VEGAS, NV 89146

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE  
TAKEHISA NAITO 2780 SOUTH JONES BOULEVARD SUITE 200-3132, LAS VEGAS, NV 89146

8. SECRETARY ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD SUITE 200-3133, LAS VEGAS, NV 89146

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD SUITE 200-3133, LAS VEGAS, NV 89146

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
BUSINESS CONSULTING

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

04/19/2019

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE





# State of California

## Secretary of State

### Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**GC39535**

**FILED**

In the office of the Secretary of State  
of the State of California

**JAN-21 2020**

**1. CORPORATE NAME**

SEA MIRROR, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258692

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☒ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

01/21/2020

TAKEHISA NAITO

CEO

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 98

# **ATTACHMENT D**



BARBARA K. CEGAVSKE  
Secretary of State  
202 North Carson Street  
Carson City, Nevada 89701-4201  
(775) 684-5708  
Website: [www.nvsos.gov](http://www.nvsos.gov)



\*040105\*

## Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

Filed in the Office of <i>Barbara K. Cegavske</i> Secretary State Of Nevada	Business Number E0472392018-9 Filing Number 20180440620-17 Filed On 10/05/2018 Number of Pages 1
--	---

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Corporation:</b>	Naito, Corp.		
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input checked="" type="checkbox"/> <b>Commercial Registered Agent:</b> Business Filings Incorporated Name <input type="checkbox"/> <b>Noncommercial Registered Agent</b> (name and address below) <b>OR</b> <input type="checkbox"/> <b>Office or Position with Entity</b> (name and address below) Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity Street Address City Nevada Zip Code Mailing Address (if different from street address) City Nevada Zip Code		
<b>3. Authorized Stock:</b> (number of shares corporation is authorized to issue)	Number of shares with par value: _____	Par value per share: \$ _____	Number of shares without par value: 100,000
<b>4. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) Takehisa Naito Name 2780 South Jones Boulevard, Suite 200-3132 Las Vegas NV 89109 Street Address City State Zip Code 2) _____ Name Street Address City State Zip Code		
<b>5. Purpose:</b> (optional; required only if Benefit Corporation status selected)	The purpose of the corporation shall be: All Lawful Business		<b>6. Benefit Corporation:</b> (see instructions) <input type="checkbox"/> Yes
<b>7. Name, Address and Signature of Incorporator:</b> (attach additional page if more than one incorporator)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. Takchisa Naito Name 2780 South Jones Boulevard, Suite 200-3132 Las Vegas NV 89109 Address City State Zip Code		
<b>8. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity. <input checked="" type="checkbox"/> <i>Mark Williams</i> Mark Williams, AVP Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date 09 10 2018		

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 78 Articles  
Revised: 1-5-15



\*140503\*



BARBARA K. CEGAVSKE  
 Secretary of State  
 202 North Carson Street  
 Carson City, Nevada 89701-4201  
 (775) 684-5708  
 Website: [www.nvsos.gov](http://www.nvsos.gov)

## Articles of Domestication

(PURSUANT TO NRS 92A.270)

Filed in the Office of <i>Barbara K. Cegavske</i>	Business Number E0472392018-9
Secretary State Of Nevada	Filing Number 20180440619-85
	Filed On 10/05/2018
	Number of Pages 1

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Entity Name and Type of Domestic Entity as set forth in its Constituent Documents:	Naito, Corp.
2. Entity Name Before Filing Articles of Domestication:	Naito, Corp.
3. Date and Jurisdiction of Original Formation:	07/28/2006, California
4. Jurisdiction that Constituted the Principal Place of Business, Central Administration or Equivalent of the Undomesticated Entity Immediately Before Articles of Domestication:	California
5. Signature of Authorized Representative:	<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <p><b>X</b></p> <p><i>[Signature]</i></p> <p>Authorized Signature Takehisa Naito, President</p> </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>10-4-2018</p> <p>Date</p> </div> </div>

Filing Fee: \$350.00

**IMPORTANT:** This document must be accompanied by the appropriate constituent document for the type of domestic entity described in article 1 above and the filing fees.

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 92A Domestication  
 Revised: 1-5-15

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**Naito, Corp.  
NAME OF CORPORATION

FOR THE FILING PERIOD OF

TO

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\* YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov) \*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ABOVE SPACE IS FOR OFFICE USE ONLY

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:**NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

001 - Governmental Entity

006 - NRS 680B.020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is:☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME Takehisa Naito		TITLE(S) PRESIDENT (OR EQUIVALENT OF)	
ADDRESS 2780 South Jones Boulevard, Suite 200-3132	CITY Las Vegas	STATE NV	ZIP CODE 89109
NAME Keishi Ikeda		TITLE(S) SECRETARY (OR EQUIVALENT OF)	
ADDRESS 2780 South Jones Boulevard, Suite 200-3133	CITY Las Vegas	STATE NV	ZIP CODE 89109
NAME Keishi Ikeda		TITLE(S) TREASURER (OR EQUIVALENT OF)	
ADDRESS 2780 South Jones Boulevard, Suite 200-3133	CITY Las Vegas	STATE NV	ZIP CODE 89109
NAME Takehisa Naito		TITLE(S) DIRECTOR	
ADDRESS 2780 South Jones Boulevard, Suite 200-3132	CITY Las Vegas	STATE NV	ZIP CODE 89109

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X**   
 Signature of Officer or  
 Other Authorized Signature

Title  
President

Date  
10-4-2018

Nevada Secretary of State List Profit  
Form: 100103 Revised: 7-1-17

**ARTICLES OF INCORPORATION**

**FILED**  
In the office of the Secretary of State  
of the State of California

**JUL 28 2006**

**ARTICLE ONE**

The name of this Corporation is

NAITO, CORP.

**ARTICLE TWO**

The purpose of this corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code..

**ARTICLE THREE**

The name and address in this state of this Corporation's initial agent for service of process is:

Young Ham  
3530 Wilshire Blvd., #1200  
Los Angeles, CA 90010

**ARTICLE FOUR**

This Corporation is authorized to issue only one class of shares, which shall be designated "common" shares. The total number of such shares that may be issued is 100,000.

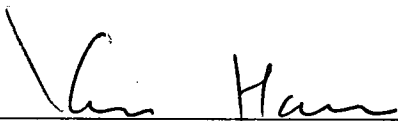
**ARTICLE FIVE**

The liability of the Directors of the Corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

**ARTICLE SIX**


The Corporation is authorized to provide indemnification of agents (as defined in Section 317 of the Corporations Code) for breach of duty to the Corporation and its stockholders through bylaw provisions or through agreements with the agents, or both, in excess of the indemnification otherwise permitted by Section 317 of the Corporations Code, subject to the limits of such excess indemnification set forth in Section 204 of the Corporations Code.

Dated: July 25, 2006

  
\_\_\_\_\_  
Young Ham, Incorporator



12-153312

	<b>State of California</b> <b>Secretary of State</b>	39	S	
<b>Statement of Information</b> (Domestic Stock and Agricultural Cooperative Corporations) <b>FEES (Filing and Disclosure): \$25.00.</b> If this is an amendment, see instructions. <b>IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM</b>				
1. CORPORATE NAME Nailo, Corp.				
2. CALIFORNIA CORPORATE NUMBER C2900416				
FILED Secretary of State State of California DEC 10 2012				
This Space for Filing Use Only				
No Change Statement (Not applicable if agent address of record is a P.O. Box address. See instructions.) 3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety. <input checked="" type="checkbox"/> If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.				
<b>Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)</b>				
4	STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE		CITY	STATE ZIP CODE
5	STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY		CITY	STATE ZIP CODE
6	MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4		CITY	STATE ZIP CODE
<b>Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)</b>				
7	CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE ZIP CODE
8	SECRETARY	ADDRESS	CITY	STATE ZIP CODE
9	CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE ZIP CODE
<b>Names and Complete Addresses of All Directors, including Directors Who are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)</b>				
10	NAME	ADDRESS	CITY	STATE ZIP CODE
11	NAME	ADDRESS	CITY	STATE ZIP CODE
12	NAME	ADDRESS	CITY	STATE ZIP CODE
13 NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:				
<b>Agent for Service of Process</b> If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.				
14 NAME OF AGENT FOR SERVICE OF PROCESS				
15 STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL			CITY	STATE ZIP CODE
<b>Type of Business</b> 16 DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION Financial Service				
17 BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.				
12/5/12		Keishi Ikeda	CFO	SIGNATURE
DATE		TYPE/PRINT NAME OF PERSON COMPLETING FORM		TITLE
SI-200 (REV 01/2012)				
APPROVED BY SECRETARY OF STATE				



# State of California

## Secretary of State

S

### Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

FW50285

FILED

In the office of the Secretary of State  
of the State of California

MAY-04 2018

### 1. CORPORATE NAME

NAITO, CORP.

### 2. CALIFORNIA CORPORATE NUMBER

C2900416

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. **If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD STE 400, LOS ANGELES, CA 90057			
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD STE 400, LOS ANGELES, CA 90057			
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4			

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

	ADDRESS	CITY	STATE	ZIP CODE
7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	1619 N. LA BREA AVE APT 614, HOLLYWOOD, CA 90028			
8. SECRETARY KEISHI IKEDA	8760 WEST PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148			
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	8760 WEST PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148			

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

	ADDRESS	CITY	STATE	ZIP CODE
10. NAME TAKEHISA NAITO	1619 N. LA BREA AVE APT 614, HOLLYWOOD, CA 90028			
11. NAME				
12. NAME				

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS  
BUSINESS FILINGS INCORPORATED

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
BUSINESS CONSULTING

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

05/04/2018

TAKEHISA NAITO

PRESIDENT

DATE



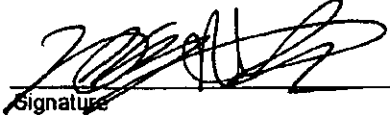
TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

BY 106

01478492

	<p><b>Secretary of State</b></p> <p><b>Certificate of Dissolution</b></p> <p>(California Stock Corporation ONLY)</p>	<p><b>DISS STK</b></p>	<p><b>FILED</b> NH</p> <p>Secretary of State</p> <p>State of California</p> <p><b>OCT 17 2018</b></p> <p>1/2 </p>
<p><b>IMPORTANT — Read instructions before completing this form.</b></p> <p>There is No Fee for filing a Certificate of Dissolution - Stock</p> <p><b>Copy Fees —</b> First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees</p>			<p><b>This Space For Office Use Only</b></p>
<p><b>1. Corporate Name</b> (Enter the exact name of the Corporation as it is recorded with the California Secretary of State.)</p> <p>Naito, Corp.</p>		<p><b>2. 7-Digit Secretary of State File Number</b></p> <p>C2900416</p>	
<p><b>3. Election</b></p> <p><input checked="" type="checkbox"/> The dissolution was made by a vote of <b>ALL</b> of the shareholders of the California corporation.</p> <p><small>Note: If the above box is not checked, a Certificate of Election to Wind Up and Dissolve (Form ELEC STK) must be filed prior to or together with this Certificate of Dissolution. (California Corporations Code section 1901.)</small></p>			
<p><b>4. Debts and Liabilities</b> (Check the applicable statement. Only one box may be checked. If second box is checked, must include the required information in an attachment.)</p> <p><input checked="" type="checkbox"/> The known debts and liabilities have been actually paid or paid as far as its assets permitted.</p> <p><input type="checkbox"/> The known debts and liabilities have been adequately provided for in full or as far as its assets permitted by their assumption. Included in the <b>attachment</b> to this certificate, incorporated herein by this reference, is a description of the provisions made and the name and address of the person, corporation or government agency that has assumed or guaranteed the payment, or the depository institution with which deposit has been made.</p> <p><input type="checkbox"/> The corporation never incurred any known debts or liabilities.</p>			
<p><b>5. Required Statements</b> (Do not alter the Required Statements — ALL must be true to file Form DISS STK.)</p> <p>a. The Corporation has been completely wound up and is dissolved.</p> <p>b. All final returns required under the California Revenue and Taxation Code have been or will be filed with the California Franchise Tax Board.</p> <p>c. The known assets have been distributed to the persons entitled thereto or the corporation acquired no known assets.</p>			
<p><b>6. Read, Verify, Date and Sign Below</b> (See instructions for signature requirements.)</p> <p>The undersigned is the sole director or a majority of the directors now in office. I declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of my own knowledge.</p>			
<p>10/15/18</p> <p>_____ Date</p>	<p></p> <p>_____ Signature</p>	<p>Takehisa Naito</p> <p>_____ Type or Print Name</p>	
<p>_____ Date</p>	<p>_____ Signature</p>	<p>_____ Type or Print Name</p>	
<p>_____ Date</p>	<p>_____ Signature</p>	<p>_____ Type or Print Name</p>	


DISS STK (REV 12/2016)

Clear Form

Print Form

2018 California Secretary of State  
www.sos.ca.gov/business/be

4258199

	<p><b>Secretary of State</b>  <b>Statement and Designation by</b>  <b>Foreign Corporation</b></p>	<p><b>S&amp;DC-S/N</b></p>
<p><b>IMPORTANT — Read Instructions before completing this form.</b></p> <p>Must be submitted with a current <b>Certificate of Good Standing</b> issued by the government agency where the corporation was formed. See Instructions.</p> <p><b>Filing Fee</b> — <b>\$100.00</b> (for a foreign stock corporation) or <b>\$30.00</b> (for a foreign nonprofit corporation)</p> <p><b>Copy Fees</b> — First page \$1.00; each attachment page \$0.50; Certification Fee — \$5.00</p> <p><i>Note:</i> Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <a href="https://www.ftb.ca.gov">https://www.ftb.ca.gov</a>.</p>		
<p><b>FILED</b> <i>LB</i>  <b>Secretary of State</b>  <b>State of California</b>  <b>MAR 22 2019</b> <i>RP</i></p>		
<p><i>1pc</i> <b>This Space For Office Use Only</b></p>		

**1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-availability](http://www.sos.ca.gov/business/be/name-availability) for general corporate name requirements and restrictions.)

**2. Jurisdiction** (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

Naito, Corp.

Nevada

**3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

<p><b>a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box</b>          2780 South Jones Boulevard Suite 200-3132</p>	<p><b>City (no abbreviations)</b>          Las Vegas</p>	<p><b>State</b>          NV</p>	<p><b>Zip Code</b>          89146</p>
<p><b>b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box</b></p>	<p><b>City (no abbreviations)</b></p>	<p><b>State</b>          CA</p>	<p><b>Zip Code</b></p>
<p><b>c. Mailing Address of Principal Executive Office, if different than item 3a</b></p>	<p><b>City (no abbreviations)</b></p>	<p><b>State</b></p>	<p><b>Zip Code</b></p>

**4. Service of Process** (Must provide either Individual OR Corporation.)

**INDIVIDUAL** — Complete Items 4a and 4b only. Must include agent's full name and California street address.

<p><b>a. California Agent's First Name (if agent is not a corporation)</b></p>	<p><b>Middle Name</b></p>	<p><b>Last Name</b></p>	<p><b>Suffix</b></p>
<p><b>b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box</b></p>	<p><b>City (no abbreviations)</b></p>	<p><b>State</b>          CA</p>	<p><b>Zip Code</b></p>

**CORPORATION** — Complete Item 4c. Only include the name of the registered agent Corporation.

**c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete item 4a or 4b**

Business Filings Incorporated

**5. Read and Sign Below** (See instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

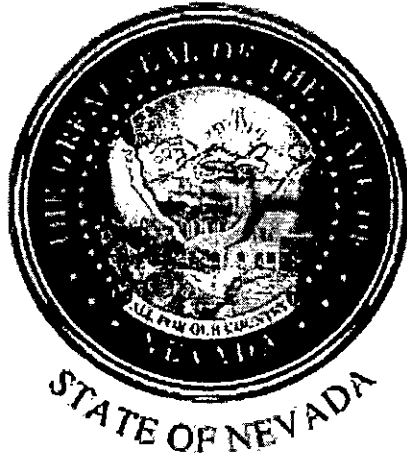
Signature

Takehisa Naito, President

Type or Print Name

4258199

## SECRETARY OF STATE

CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **NAITO, CORP.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 5, 2018, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 21, 2019.

A handwritten signature in cursive script that reads "Barbara K. Cegavske".

Barbara K. Cegavske  
Secretary of State

Electronic Certificate  
Certificate Number: C20190321-0635





# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**G587646**

**FILED**

In the office of the Secretary of State  
of the State of California

**APR-19 2019**

**1. CORPORATE NAME**

NAITO, CORP.

**2. CALIFORNIA CORPORATE NUMBER**

C4258199

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE  
2780 SOUTH JONES BOULEVARD SUITE 200-3132, LAS VEGAS, NV 89146

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE  
TAKEHISA NAITO 2780 SOUTH JONES BOULEVARD SUITE 200-3132, LAS VEGAS, NV 89109

8. SECRETARY ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD SUITE 200-3133, LAS VEGAS, NV 89146

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD SUITE 200-3133, LAS VEGAS, NV 89146

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
BUSINESS CONSULTING

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

04/19/2019

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**GC31551**

**FILED**

In the office of the Secretary of State  
of the State of California

**JAN-17 2020**

**1. CORPORATE NAME**

NAITO, CORP.

**2. CALIFORNIA CORPORATE NUMBER**

C4258199

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE  
2780 SOUTH JONES BOULEVARD, STE 200-3132, LAS VEGAS, NV 89109

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE  
TAKEHISA NAITO 2780 SOUTH JONES BOULEVARD, STE 200-3132, LAS VEGAS, NV 89109

8. SECRETARY ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD, STE 200-3132, LAS VEGAS, NV 89109

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD, STE 200-3132, LAS VEGAS, NV 89109

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
BUSINESS CONSULTING

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

01/17/2020

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

## YOUR RETURN MAILING ADDRESS

NAME: NAITO CORP

ADDRESS: 1930 WILSHIRE BLVD SUITE 400

CITY: LOS ANGELES

STATE: CA

ZIP CODE: 90057

2011 154549

FILED  
Dec 23 2011Dean C. Logan, Registrar-Recorder/County Clerk  
Electronically Signed by CARINA CHEN

## FICTITIOUS BUSINESS NAME STATEMENT

TYPE OF FILING AND FILING FEE (Check one)

- ☒ Original- \$26.00 (FOR ORIGINAL FILING WITH ONE BUSINESS NAME ON STATEMENT) ☐ New Filings- \$26.00 (CHANGES IN FACTS FROM ORIGINAL FILING- REQUIRES PUBLICATION)  
☐ Refile- \$26.00 (NO CHANGES IN THE FACTS FROM ORIGINAL FILING)  
 \$5.00- FOR EACH ADDITIONAL BUSINESS NAME FILED ON SAME STATEMENT, DOING BUSINESS AT THE SAME LOCATION \$5.00- FOR EACH ADDITIONAL OWNER IN EXCESS OF ONE OWNER

The following person(s) is (are) doing business as:

\*1. GEORGE PROMISE

2.

Print Fictitious Business Name(s)

1930 WILSHIRE BLVD SUITE 400

1930 WILSHIRE BLVD SUITE 400

Street address of principal place of business

Mailing address if different

LOS ANGELES CA 90057

Los Angeles LOS ANGELES CA 90057

City

State

Zip

COUNTY

City

State

Zip

Articles of Incorporation or Organization Number (if applicable): "AI" FOR 02900416

## \*\*\* REGISTERED OWNER(S):

1. NAITO CORP

Full Name/Corp/LLC (P.O. Box not accepted)

1930 WILSHIRE BLVD SUITE 400

Residence Address

LOS ANGELES CA 90057

City

State

Zip

CALIFORNIA

If Corporation or LLC - Print State of Incorporation/Organization

2.

Full Name/Corp/LLC (P.O. Box not accepted)

Residence Address

City State Zip

If Corporation or LLC - Print State of Incorporation/Organization

3.

Full Name/Corp/LLC (P.O. Box not accepted)

Residence Address

City State Zip

If Corporation or LLC - Print State of Incorporation/Organization

4.

Full Name/Corp/LLC (P.O. Box not accepted)

Residence Address

City State Zip

If Corporation or LLC - Print State of Incorporation/Organization

IF MORE THAN FOUR REGISTRANTS, ATTACH ADDITIONAL SHEET SHOWING OWNER INFORMATION

## \*\*\*\* THIS BUSINESS IS CONDUCTED BY: (Check one)

- ☐ an Individual ☐ a General Partnership ☐ a Limited Partnership ☐ a Limited Liability Company  
☐ an Unincorporated Association other than a Partnership ☒ a Corporation ☐ a Trust ☐ Copartners  
☐ Husband and Wife ☐ Joint Venture ☐ State or Local Registered Domestic Partners ☐ a Limited Liability Partnership

\*\*\*\*\* The registrant commenced to transact business under the fictitious business name or names listed above on 3/9/2007  
 (Insert N/A above if you haven't started to transact business)

I declare that all information in this statement is true and correct.  
 (A registrant who declares as true information which he or she knows to be false is guilty of a crime.)

REGISTRANT/CORP/LLC NAME (PRINT) NAITO CORP

TITLE CEO

REGISTRANT SIGNATURE

IF CORP OR LLC, PRINT NAME

Keishi Ikeda

If corporation, also print corporate title of officer. If LLC, also print title of officer or manager.

This statement was filed with the County Clerk of LOS ANGELES on the date indicated by the filed stamp in the upper right corner.

NOTICE - IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION.

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).

I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.

DEAN C. LOGAN, LOS ANGELES COUNTY CLERK

BY: Deputy

# **ATTACHMENT E**



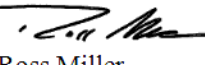
**ROSS MILLER**  
 Secretary of State  
 204 North Carson Street, Suite 4  
 Carson City, Nevada 89701-4520  
 (775) 684-5708  
 Website: [www.nvsos.gov](http://www.nvsos.gov)



\*040104\*

## Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number <b>20140793930-58</b> Filing Date and Time <b>12/04/2014 2:47 PM</b> Entity Number <b>E0608412014-3</b>
---	--

(This document was filed electronically.)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Corporation:</b>	KOTOBUKI MARKETING, INC.			
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: BUSINESS FILINGS INCORPORATED Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below) Name of Noncommercial Registered Agent <b>OR</b> Name of Title of Office or Other Position with Entity Street Address City Nevada Zip Code Mailing Address (if different from street address) City Nevada Zip Code			
<b>3. Authorized Stock:</b> (number of shares corporation is authorized to issue)	Number of shares with par value: 2000	Par value per share: \$ 0.01	Number of shares without par value: 0	
<b>4. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) TAKEHISA NAITO Name 2780 S. JONES BLVD., SUITE 200-3827 LAS VEGAS NV 89146 Street Address City State Zip Code 2) Name Street Address City State Zip Code			
<b>5. Purpose:</b> (optional; required only if Benefit Corporation status selected)	The purpose of the corporation shall be: ANY LEGAL PURPOSE		<b>6. Benefit Corporation:</b> (see instructions) <input type="checkbox"/> Yes	
<b>7. Name, Address and Signature of Incorporator:</b> (attach additional page if more than one incorporator)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. TAKEHISA NAITO Name 2780 S. JONES BLVD., SUITE 200-3827 LAS VEGAS NV 89146 Address City State Zip Code X TAKEHISA NAITO Incorporator Signature			
<b>8. Certificate of Acceptance of Appointment of Registered Agent:</b>	I hereby accept appointment as Registered Agent for the above named Entity. <input checked="" type="checkbox"/> BUSINESS FILINGS INCORPORATED Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity 12/4/2014 Date			

This form must be accompanied by appropriate fees.

**(PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

KOTOBUKI MARKETING, INC.

E0608412014-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF DEC, 2014 TO DEC, 2015



\*100101\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number <b>20140798308-12</b> Filing Date and Time <b>12/08/2014 4:46 PM</b> Entity Number <b>E0608412014-3</b>
--	--

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- ☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:  **NRS 76.020 Exemption Codes**  
**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**  
☐ This corporation is a publicly traded corporation. The Central Index Key number is:   
☐ This publicly traded corporation is not required to have a Central Index Key number.

001 - Governmental Entity  
 005 - Motion Picture Company  
 006 - NRS 680B.020 Insurance Co.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 2780 S. JONES BLVD., SUITE 200-3827 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 2780 S. JONES BLVD., SUITE 200-3828 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 2780 S. JONES BLVD., SUITE 200-3828 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA	TITLE(S) DIRECTOR		
ADDRESS 2780 S. JONES BLVD., SUITE 200-3828 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X TAKEHISA NAITO

Title

PRESIDENT

Date

12/8/2014 4:46:12 PM

Signature of Officer or  
Other Authorized Signature



**(PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

KOTOBUKI MARKETING, INC.

E0608412014-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF DEC, 2015 TO DEC, 2016



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsliverflume.gov](http://www.nvsliverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
**ABOVE SPACE IS FOR OFFICE USE ONLY****CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO		TITLE(S) PRESIDENT (OR EQUIVALENT OF)	
ADDRESS 2780 S. JONES BLVD., SUITE 200-3827 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA		TITLE(S) SECRETARY (OR EQUIVALENT OF)	
ADDRESS 2780 S. JONES BLVD., SUITE 200-3828 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA		TITLE(S) TREASURER (OR EQUIVALENT OF)	
ADDRESS 2780 S. JONES BLVD., SUITE 200-3828 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME TAKEHISA NAITO		TITLE(S) DIRECTOR	
ADDRESS 2780 S. JONES BLVD., SUITE 200-3827 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X TAKEHISA NAITO

Title  
PRESIDENTDate  
11/30/2015 2:10:21 PM**Signature of Officer or  
Other Authorized Signature**Nevada Secretary of State  
Revised: 7-1-15

**(PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

KOTOBUKI MARKETING, INC.

E0608412014-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF DEC, 2016 TO DEC, 2017



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsliverflume.gov](http://www.nvsliverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the Office of <i>Barbara K. Cegeste</i>	Business Number <b>E0608412014-3</b>
Secretary State Of Nevada	Filing Number <b>20160500103-98</b>
	Filed On <b>11/16/2016</b>
	Number of Pages <b>1</b>

(This document was filed electronically.)

**ABOVE SPACE IS FOR OFFICE USE ONLY****CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3827 , USA</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>

NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3828 , USA</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>

NAME <b>KEISHI IKEDA</b>		TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3828 , USA</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>

NAME <b>TAKEHISA NAITO</b>		TITLE(S) <b>DIRECTOR</b>	
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3827 , USA</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

Title

PRESIDENT

Date

11/16/2016 7:22:47 AM

**Signature of Officer or  
Other Authorized Signature**Nevada Secretary of State List Profit  
Revised: 7-1-15

**(PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS  
LICENSE APPLICATION OF:**

KOTOBUKI MARKETING, INC.

NAME OF CORPORATION

ENTITY NUMBER

E0608412014-3

FOR THE FILING PERIOD OF DEC. 2016 TO DEC. 2017



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for **each additional copy** generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
**ABOVE SPACE IS FOR OFFICE USE ONLY****CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS <b>1619 N. LA BREA AVE. APT 614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS <b>8760 W. PATRICK LN. UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS <b>8760 W. PATRICK LN. UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS <b>1619 N. LA BREA AVE. APT 614</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** KEISHI IKEDATitle  
**SECRETARY**Date  
**5/5/2017 9:21:33 AM****Signature of Officer or  
Other Authorized Signature**



**(PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS  
LICENSE APPLICATION OF:**

ENTITY NUMBER

KOTOBUKI MARKETING, INC.

E0608412014-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF DEC, 2017 TO DEC, 2018



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for **each additional copy** generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the Office of <i>Barbara K. Cegeste</i>	Business Number <b>E0608412014-3</b>
Secretary State Of Nevada	Filing Number <b>20170432025-16</b>
	Filed On <b>10/11/2017</b>
	Number of Pages <b>1</b>

(This document was filed electronically.)  
**ABOVE SPACE IS FOR OFFICE USE ONLY****CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

001 - Governmental Entity

006 - NRS 680B.020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS <b>7430 YONIE COURT</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89117</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS <b>8760 W. PATRICK LN. UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS <b>8760 W. PATRICK LN. UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS <b>7430 YONIE COURT</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89117</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

Title

PRESIDENT

Date

10/11/2017 1:36:04 PM

**Signature of Officer or  
Other Authorized Signature**



**(PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

ENTITY NUMBER

KOTOBUKI MARKETING, INC.

E0608412014-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF DEC, 2018 TO DEC, 2019



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for **each additional copy** generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the Office of <i>Barbara K. Cegeste</i>	Business Number <b>E0608412014-3</b>
Secretary State Of Nevada	Filing Number <b>20180431714-51</b>
	Filed On <b>10/02/2018</b>
	Number of Pages <b>1</b>

(This document was filed electronically.)  
**ABOVE SPACE IS FOR OFFICE USE ONLY****CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes****NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

001 - Governmental Entity

006 - NRS 680B.020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS <b>2780 S. JONES BLVD. #200-3132</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS <b>2780 S. JONES BLVD. #200-3133</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS <b>2780 S. JONES BLVD. #200-3133</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS <b>2780 S. JONES BLVD. #200-3132</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

Title

PRESIDENT

Date

10/2/2018 8:48:56 AM

**Signature of Officer or  
Other Authorized Signature**

<b>S&amp;DC-S/N</b>	<b>Statement and Designation by Foreign Corporation</b>
---------------------	---

To qualify a corporation from another state or country to transact intrastate business in California, fill out this form, and submit for filing along with:

- A \$100 filing fee (for a foreign stock corporation) or \$30 filing fee (for a foreign nonprofit corporation), and
- A certificate of good standing, issued within the last six (6) months by the agency where the corporation was formed. **Note:** If the corporation is a nonprofit, the certificate of good standing also must indicate the corporation is a nonprofit or nonstock corporation.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.

**Important!** Corporations in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board. For more information, go to <https://www.ftb.ca.gov>.

**FILED** *B*  
**Secretary of State**  
**State of California**  
**JUL 13 2016** *PM*

*IPC* This Space For Office Use Only

For questions about this form, go to [www.sos.ca.gov/business/be/filing-tips.htm](http://www.sos.ca.gov/business/be/filing-tips.htm).

**Corporate Name** (List the exact name of the corporation, as shown in the certificate of good standing. If the name of the corporation is not available for use in the State of California, the corporation must qualify under an assumed name. E.g., "[list the exact name] which will do business in California as [list the proposed assumed name]." For general corporate name requirements and restrictions in California, go to [www.sos.ca.gov/business/be/name-availability.htm](http://www.sos.ca.gov/business/be/name-availability.htm).)

① Kotobuki Marketing, Inc.

**Corporate History**

② State or foreign country where this corporation was formed: Nevada

**Service of Process** (List a California resident or a California registered corporate agent that agrees to be your agent to accept service of process in case your corporation is sued. You may list any adult who lives in California. You may **not** list your own corporation as the agent. Do not list an address if the agent is a California registered corporate agent as the address for service of process is already on file.)

③ a. Business Filings Incorporated

Agent's Name

b. CA  
 Agent's Street Address (if agent is not a corporation) - Do not list a P.O. Box City (no abbreviations) State Zip

The corporation named in Item 1 above irrevocably consents to service of process directed to it upon the agent designated above, and to service of process on the California Secretary of State if that agent or that agent's successor is no longer authorized to act or cannot be found at the address given.

**Corporate Addresses**


④ a. 2780 S. Jones Blvd. Suite 200-3827, Las Vegas, Nevada 89146

Street Address of Principal Executive Office - Do not list a P.O. Box City (no abbreviations) State Zip

b. CA  
 Street Address of Principal Office in California, if any - Do not list a P.O. Box City (no abbreviations) State Zip

c. CA  
 Mailing Address of Principal Executive Office, if different from 4a or 4b City (no abbreviations) State Zip

**Read and sign below:** This form must be signed by an officer of the foreign corporation.

	<u>Takehisa Naito</u>	<u>President</u>
Sign here	Print your name here	Your officer title

Make check/money order payable to: **Secretary of State**

Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

**By Mail**

Secretary of State  
 Business Entities, P.O. Box 944260  
 Sacramento, CA 94244-2600

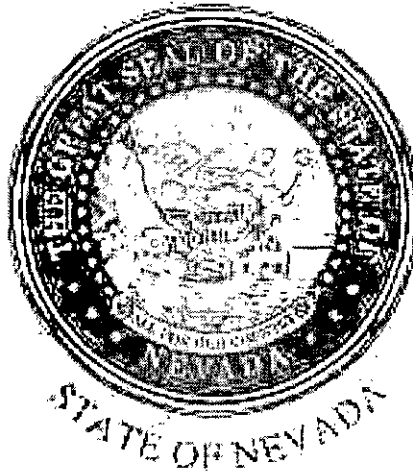
**Drop-Off**

Secretary of State  
 1500 11th Street, 3rd Floor  
 Sacramento, CA 95814



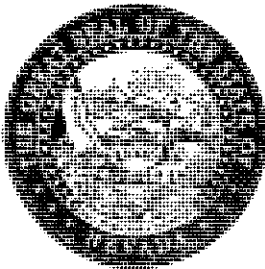
3926730

## SECRETARY OF STATE

**CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING**

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **KOTOBUKI MARKETING, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 4, 2014, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 12, 2016.

A handwritten signature in cursive script that reads "Barbara K. Cegavske".

BARBARA K. CEGAVSKE

Secretary of State

Electronic Certificate

Certificate Number: C20160712-0094

You may verify this electronic certificate  
online at <http://www.nvsos.gov/>



# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. **If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE




SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 123

4258200

	<p><b>Secretary of State</b>  <b>Statement and Designation by</b>  <b>Foreign Corporation</b></p>	<p><b>S&amp;DC-S/N</b></p>
<p><b>IMPORTANT — Read instructions before completing this form.</b></p> <p>Must be submitted with a current <b>Certificate of Good Standing</b> issued by the government agency where the corporation was formed. See Instructions.</p> <p><b>Filing Fee</b> — \$100.00 (for a foreign stock corporation) or          \$30.00 (for a foreign nonprofit corporation)</p> <p><b>Copy Fees</b> — First page \$1.00; each attachment page \$0.50;          Certification Fee - \$5.00</p> <p><b>Note:</b> Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <a href="https://www.ftb.ca.gov">https://www.ftb.ca.gov</a>.</p>		
<div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <p style="text-align: right;"><b>FILED</b> <i>LB</i></p> <p style="text-align: right;"><b>Secretary of State</b>  <b>State of California</b></p> <p style="text-align: right;"><b>MAR 22 2019</b> <i>llc</i></p> <p style="text-align: right;">This Space For Office Use Only</p> </div> <div style="width: 35%; text-align: center;">    </div> </div>		

**1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-availability](http://www.sos.ca.gov/business/be/name-availability) for general corporate name requirements and restrictions.)

**2. Jurisdiction** (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

Kotobuki Marketing, Inc.	Nevada
--------------------------	--------

**3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

<b>a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box</b> 2780 S. Jones Blvd. Suite 200-3827	<b>City (no abbreviations)</b> Las Vegas	<b>State</b> NV	<b>Zip Code</b> 89146
<b>b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box</b>	<b>City (no abbreviations)</b>	<b>State</b> CA	<b>Zip Code</b>
<b>c. Mailing Address of Principal Executive Office, if different than item 3a</b>	<b>City (no abbreviations)</b>	<b>State</b>	<b>Zip Code</b>

**4. Service of Process** (Must provide either Individual OR Corporation.)

**INDIVIDUAL** - Complete Items 4a and 4b only. Must include agent's full name and California street address.

<b>a. California Agent's First Name (if agent is not a corporation)</b>	<b>Middle Name</b>	<b>Last Name</b>	<b>Suffix</b>
<b>b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box</b>	<b>City (no abbreviations)</b>	<b>State</b> CA	<b>Zip Code</b>

**CORPORATION** - Complete Item 4c. Only include the name of the registered agent Corporation.

**c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete item 4a or 4b**

Business Filings Incorporated
-------------------------------

**5. Read and Sign Below** (See instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

*[Handwritten Signature]*  
 Signature

Takehisa Naito, President

Type or Print Name

S&DC-S/N (REV 03/2017)

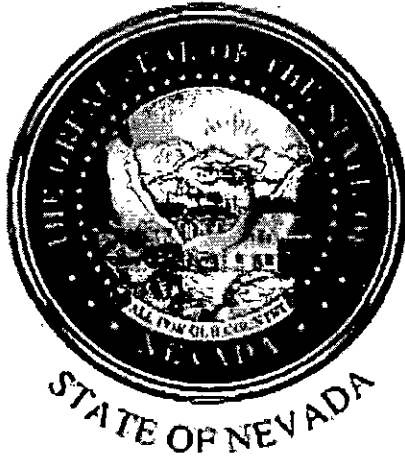
Clear Form

Print Form

2017 California Secretary of State  
[www.sos.ca.gov/business/be](http://www.sos.ca.gov/business/be)

4258200

## SECRETARY OF STATE

CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **KOTOBUKI MARKETING, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 4, 2014, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 21, 2019.

A handwritten signature in cursive script that reads "Barbara K. Cegavske".

Barbara K. Cegavske  
Secretary of State

Electronic Certificate  
Certificate Number: C20190321-0427



# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**G588084**

**FILED**

In the office of the Secretary of State  
of the State of California

**APR-19 2019**

**1. CORPORATE NAME**

KOTOBUKI MARKETING, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258200

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE  
2780 S. JONES BLVD. SUITE 200-3827, LAS VEGAS, NV 89146

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE  
TAKEHISA NAITO 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146

8. SECRETARY ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
CUSTOMER SERVICE CALL CENTER

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

04/19/2019

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**F**

**GC32918**

**FILED**

In the office of the Secretary of State  
of the State of California

**JAN-17 2020**

**1. CORPORATE NAME**

KOTOBUKI MARKETING, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258200

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to **Item 13**.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

**4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE** CITY STATE ZIP CODE  
101 CONVENTION CENTER DRIVE STE 500, LAS VEGAS, NV 89109

**5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY** CITY STATE ZIP CODE

**6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4** CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

**7. CHIEF EXECUTIVE OFFICER/** ADDRESS CITY STATE ZIP CODE  
TAKEHISA NAITO 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146

**8. SECRETARY** ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146

**9. CHIEF FINANCIAL OFFICER/** ADDRESS CITY STATE ZIP CODE  
KEISHI IKEDA 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

**10. NAME OF AGENT FOR SERVICE OF PROCESS**

BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED

**11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL** CITY STATE ZIP CODE

**Type of Business**

**12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION**  
CUSTOMER SERVICE CALL CENTER

**13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.**

01/17/2020

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE





**Secretary of State**  
**Certificate of Surrender**  
 (Foreign Qualified Corporation ONLY)

**SURC**

**IMPORTANT — Read Instructions before completing this form.**

There is **No Fee** for filing a Certificate of Surrender

**Copy Fees** — First page \$1.00; each attachment page \$0.50;  
 Certification Fee - \$5.00

**Note:** For information about Franchise Tax Board final tax return requirements, go to <https://www.ftb.ca.gov>.

**FILED** *nh*  
**Secretary of State**  
**State of California**

*IPC* **OCT 26 2017**

**This Space For Office Use Only**

**1. Corporate Name** (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)

Kotobuki Marketing, Inc.

**2. 7-Digit Secretary of State File Number** **3. Jurisdiction** (State, foreign country or place where this corporation is formed.)

C3926730

Nevada

**4. Mailing Address to mail copies of Legal Service** (Enter the complete mailing address where the California Secretary of State may forward copies of any legal documents against the corporation that are served on the Secretary of State intended for the corporation.)

Mailing Address of Corporation	City (no abbreviations)	State	Zip Code
2780 S. Jones Blvd. Suite 200-3827	Las Vegas	NV	89146

**5. Required Statements** (Do not alter the Required Statements – ALL must be true to file this Certificate of Surrender.)

Statements 5(a) – 5(d) are true:

- a) The corporation hereby surrenders its rights and authority to transact intrastate business in the State of California.
- b) The corporation hereby revokes its designation of agent for service of process in California.
- c) The corporation consents to process against it in any action upon any liability or obligation incurred within the State of California prior to the filing of this Certificate of Surrender may be served upon the California Secretary of State.
- d) All final returns required under the California Revenue and Taxation Code have been or will be filed with the California Franchise Tax Board.

**6. Read and Sign Below** (See Instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

Signature

Keishi Ikeda, Secretary

Type or Print Name

SURC (REV 01/2017)

**Clear Form**

**Print Form**

2017 California Secretary of State  
[www.sos.ca.gov/business/be](http://www.sos.ca.gov/business/be)

Clark County / Business License / BL Search



## Business License



### Business License Detail Information

<b>License Number:</b>	2003119.056-101
<b>MJBL Number:</b>	
<b>Business:</b>	Kotobuki Marketing, Inc. Suite 500 101 Convention Center Dr Las Vegas, NV 89109
<b>Business Telephone:</b>	(213) 503-6707
<b>License Category:</b>	Admin & Support Services - Group 1
<b>Status:</b>	Licensed
<b>Date of License:</b>	04/18/2017
<b>Out of Business Date:</b>	
<b>Business Owner(s)</b>	
Ikeda, Keishi Naito, Takehisa	

[Return to Previous Page](#)  
[Return to Business License Database Search Options](#)

# **ATTACHMENT F**

3277599

FILED

In the office of the Secretary of State  
of the State of California

MAR 03 2010

ARTICLES OF INCORPORATION  
of  
EBISU MARKETING, CORP.

---

ARTICLE I

The name of this corporation is EBISU MARKETING, CORP..

ARTICLE II

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

ARTICLE III

The name and address in the State of California of this corporation's initial agent for service of process is: GERALD K. KITANO, 3435 Wilshire Blvd., Suite 1800, Los Angeles, California 90010.

ARTICLE IV

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is ONE HUNDRED THOUSAND (100,000)

ARTICLE V

The liability of the Directors of this corporation for monetary damages in any action brought by or in the right of their corporation for breach of a Director's duties to the corporation and its shareholders is eliminated to the fullest extent permissible under California law.

ARTICLE VI

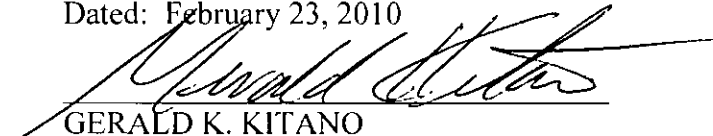
This corporation is authorized to provide indemnification of agents (as defined in Section 317 of the California Corporations Code) for breach of duty to the corporation and its stockholders through bylaw provisions or through agreement with the agent, or both, in excess of the indemnification otherwise permitted by Section 317 of the Corporations

Code, subject to the limits on such excess indemnification set forth in Section 204 of said Code.

#### ARTICLE VII

If proceedings for the dissolution of this corporation to which California Corporations Code Section 2000 applies are instituted, the provisions of any Buy-sell or similar shareholders agreement then in effect shall govern and supersede any provisions of Section 2000 inconsistent therewith, to the extent required to enforce said agreement.

Dated: February 23, 2010

  
GERALD K. KITANO  
Incorporator



# State of California Secretary of State

S

E-E34937

FILED

Statement of Information  
(Domestic Stock and Agricultural Cooperative Corporations)

In the office of the Secretary of  
State of the State of California

FEES (Filing and Disclosure): \$25.00. If amendment, see instructions.  
IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

Mar - 17 2011

This Space For Filing Use Only

## 1. CORPORATE NAME

C3277399

EBISU MARKETING, CORP.

## Due Date:

Complete Addresses for the Following (Do not abbreviate the name of the city. Items 2 and 3 cannot be P.O. Boxes.)

2. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
1930 WILSHIRE BLVD. #400 LOS ANGELES CA 90057			
3. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
4. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 2	CITY	STATE	ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

5. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	6260 W. 3RD STREET #407	LOS ANGELES, CA	90036	
6. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	6260 W. 3RD STREET #407	LOS ANGELES, CA	90036	
7. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	6260 W. 3RD STREET #407	LOS ANGELES CA	90036	

Names and Complete Addresses of All Directors, Including Directors Who Are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)

8. NAME	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	6260 W. 3RD STREET #407	LOS ANGELES, CA	90036	
9. NAME	ADDRESS	CITY	STATE	ZIP CODE
10. NAME	ADDRESS	CITY	STATE	ZIP CODE

## 11. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

Agent for Service of Process (If the agent is an individual, the agent must reside in California and Item 13 must be completed with a California street address (a P.O.Box address is not acceptable). If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 13 must be left blank.)

## 12. NAME OF AGENT FOR SERVICE OF PROCESS

KEISHI IKEDA

## 13. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

1930 WILSHIRE BLVD. #400 LOS ANGELES, CA 90057

## Type of Business

## 14. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

MARKETING

## 15. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

03/17/2011

TAKEHISA NAITO

C.E.O.

DATE

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

TITLE

SIGNATURE

SI-200 C (REV 10/2010)

APPROVED BY SECRETARY OF STATE

PX19 - 133





# State of California Secretary of State

S

E-K34259

FILED

In the office of the Secretary of State  
of the State of California

Mar - 29 2012

This Space For Filing Use Only

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00. If amendment, see instructions.

IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

## 1. CORPORATE NAME

C3277399

EBISU MARKETING, CORP.

1930 WILSHIRE BLVD. #400

LOS ANGELES, CA 90057

## Due Date:

No Change Statement ( Not applicable if agent address of record is a P.O. Box address. See instructions.)

2 ☒

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 16.

If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement has been previously filed, this form must be completed in its entirety.

Complete Addresses for the Following (Do not abbreviate the name of the city. Items 3 and 4 cannot be P.O. Boxes.)

3. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE CA	ZIP CODE
5. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 3	CITY	STATE	ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

6. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
7. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
8. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

Names and Complete Addresses of All Directors, Including Directors Who are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)

9. NAME	ADDRESS	CITY	STATE	ZIP CODE
10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE

## 12. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

Agent for Service of Process (If the agent is an individual, the agent must reside in California and Item 14 must be completed with a California street address (a P.O. Box address is not acceptable). If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 14 must be left blank.)

## 13. NAME OF AGENT FOR SERVICE OF PROCESS

14. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE CA	ZIP CODE
---	------	-------------	----------

## Type of Business

## 15. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

16. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

03/29/2012

DATE

KEISHI IKEDA

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

CFO


TITLE

SIGNATURE

SI-200 N/C (REV 10/2010)

APPROVED BY SECRETARY OF STATE

18-641299

	<b>Secretary of State</b> <b>Statement of Information</b> (California Stock, Agricultural Cooperative and Foreign Corporations)	<b>SI-550</b>  <div style="font-size: 2em; font-weight: bold;">2</div>	<div style="font-weight: bold; font-size: 1.2em;">FILED</div> <div style="font-weight: bold;">Secretary of State</div> <div style="font-weight: bold;">State of California</div> <div style="font-weight: bold; margin-top: 10px;">JUL 11 2018</div> <div style="margin-top: 20px; font-style: italic; font-size: 1.2em;">1.50/NF/PC</div> <div style="font-size: 0.8em;">This Space For Office Use Only</div>				
<b>IMPORTANT — Read instructions before completing this form.</b>			<div style="font-size: 1.5em; font-weight: bold;">893</div>				
<b>Fees (Filing plus Disclosure) – \$25.00;</b>  <b>Copy Fees –</b> First page \$1.00; each attachment page \$0.50; Certification Fee – \$5.00 plus copy fees							
<b>1. Corporation Name</b> (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)  EBISU MARKETING, CORP.			<b>2. 7-Digit Secretary of State File Number</b>  C3277399				
<b>3. Business Addresses</b>							
a. Street Address of Principal Executive Office - Do not list a P.O. Box <b>1930 Wilshire Blvd Suite 400</b>		City (no abbreviations) <b>Los Angeles</b>	State <b>CA</b>	Zip Code <b>90057</b>			
b. Mailing Address of Corporation, if different than Item 3a		City (no abbreviations)	State	Zip Code			
c. Street Address of Principal California Office, if any and if different than Item 3a - Do not list a P.O. Box		City (no abbreviations)	State <b>CA</b>	Zip Code			
<b>4. Officers</b>							
The Corporation is required to list all three of the officers set forth below. An additional title for the Chief Executive Officer and Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.							
<b>a. Chief Executive Officer/</b> <b>Takehisa</b> Address <b>1619 N. La Brea Ave., #614</b>		First Name <b>Takehisa</b>	Middle Name	Last Name <b>Naito</b>  City (no abbreviations) <b>Hollywood</b>	State <b>CA</b>	Zip Code <b>90028</b>	Suffix
<b>b. Secretary</b> <b>Takehisa</b> Address <b>1619 N. La Brea Ave., #614</b>		First Name <b>Takehisa</b>	Middle Name	Last Name <b>Naito</b>  City (no abbreviations) <b>Hollywood</b>	State <b>CA</b>	Zip Code <b>90028</b>	Suffix
<b>c. Chief Financial Officer/</b> <b>Takehisa</b> Address <b>1619 N. La Brea Ave., #614</b>		First Name <b>Takehisa</b>	Middle Name	Last Name <b>Naito</b>  City (no abbreviations) <b>Hollywood</b>	State <b>CA</b>	Zip Code <b>90028</b>	Suffix
<b>5. Director(s)</b>							
California Stock and Agricultural Cooperative Corporations ONLY: Item 5a: At least one name and address must be listed. If the Corporation has additional directors, enter the name(s) and addresses on Form SI-550A (see instructions).							
<b>a. First Name</b> <b>Takehisa</b> Address <b>1619 N. La Brea Ave. #614</b>		Middle Name	Last Name <b>Naito</b>  City (no abbreviations) <b>Hollywood</b>	State <b>CA</b>	Zip Code <b>90028</b>	Suffix	
<b>b. Number of vacancies on the Board of Directors, if any</b>							
<b>6. Service of Process</b> (Must provide either Individual OR Corporation.)							
<b>INDIVIDUAL –</b> Complete Items 6a and 6b only. Must include agent's full name and California street address.							
<b>a. California Agent's First Name</b> (if agent is not a corporation)			<b>Middle Name</b>	<b>Last Name</b>		<b>Suffix</b>	
<b>b. Street Address</b> (if agent is not a corporation) - Do not enter a P.O. Box			City (no abbreviations)		State <b>CA</b>	Zip Code	
<b>CORPORATION –</b> Complete Item 6c only. Only include the name of the registered agent Corporation.							
<b>c. California Registered Corporate Agent's Name</b> (if agent is a corporation) - Do not complete Item 6a or 6b <b>Business Filings Incorporated</b>							
<b>7. Type of Business</b> Describe the type of business or services of the Corporation <b>Customer Service</b>							
<b>8. The Information contained herein, including in any attachments, is true and correct.</b>							

July 10, 2018

Date

Takehisa Naito

Type or Print Name of Person Completing the Form

CEO

Title

Signature

SI-550 (REV 01/2017)

Clear Form

Print Form

 2017 California Secretary of State  
 www.sos.ca.gov/business/be

PX19 - 135

Attachment to Statement of Information  
**EBISU MARKETING, CORP.**

4. Officers:

Vice President: Takehisa Naito, 1619 N. La Brea Ave., #614, Hollywood, California 90028

2/2



# State of California

## Secretary of State

S

### Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

GC32906

**FILED**In the office of the Secretary of State  
of the State of California

JAN-17 2020

## 1. CORPORATE NAME

EBISU MARKETING, CORP.

## 2. CALIFORNIA CORPORATE NUMBER

C3277399

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)3. **If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**
☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.
**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4			

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

	ADDRESS	CITY	STATE	ZIP CODE
7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
8. SECRETARY TAKEHISA NAITO	1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
9. CHIEF FINANCIAL OFFICER/ TAKEHISA NAITO	1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

	ADDRESS	CITY	STATE	ZIP CODE
10. NAME TAKEHISA NAITO	1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
11. NAME				
12. NAME				

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED
15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

**Type of Business**16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
CUSTOMER SERVICE

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

01/17/2020

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

EX-15-138

# **ATTACHMENT G**



3541552

## ARTICLES OF INCORPORATION

**FILED** *Gma*  
Secretary of State *N*  
State of California  
MAR 06 2013  
*lcc*

### Article I

The name of the corporation is: Hotei Marketing, Inc.

### Article II

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

### Article III

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is two thousand (2,000), with a one cent (\$0.01) par value per share.

### Article IV

The name in the State of California of this corporation's initial agent for service of process is:

Business Filings Incorporated

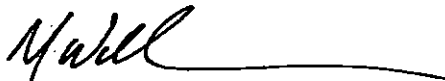
### Article V

The initial business and mailing address of the corporation is: 1930 Wilshire Blvd Suite 400, Los Angeles, California 90057

### Article VI

The liability of the directors of the corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

Business Filings Incorporated, Incorporator



BY: Mark Williams, A.V.P.



# State of California

## Secretary of State

S

### Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

G307216

FILED

In the office of the Secretary of State  
of the State of California

JAN-10 2019

### 1. CORPORATE NAME

HOTEI MARKETING, INC.

### 2. CALIFORNIA CORPORATE NUMBER

C3541552

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4			

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

	ADDRESS	CITY	STATE	ZIP CODE
7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	1619 N. LA BREA AVE. #614, HOLLYWOOD, CA 90028			
8. SECRETARY KEISHI IKEDA	8760 W. PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148			
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	8760 W. PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148			

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

	ADDRESS	CITY	STATE	ZIP CODE
10. NAME TAKEHISA NAITO	1619 N. LA BREA AVE. #614, HOLLYWOOD, CA 90028			
11. NAME				
12. NAME				

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS BUSINESS FILINGS INCORPORATED			
15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE

### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
MARKETING

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

01/10/2019	TAKEHISA NAITO	PRESIDENT	
DATE	TYPE/PRINT NAME OF PERSON COMPLETING FORM	TITLE	SIGNATURE



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

GC31950

**FILED**In the office of the Secretary of State  
of the State of California

JAN-17 2020

## 1. CORPORATE NAME

HOTEI MARKETING, INC.

## 2. CALIFORNIA CORPORATE NUMBER

C3541552

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.
**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4			

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

	ADDRESS	CITY	STATE	ZIP CODE
7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146			
8. SECRETARY KEISHI IKEDA	2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146			
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146			

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

	ADDRESS	CITY	STATE	ZIP CODE
10. NAME TAKEHISA NAITO	2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146			
11. NAME				
12. NAME				

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED
15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

**Type of Business**16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
MARKETING

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

01/17/2020

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

EX-15-143


# **ATTACHMENT H**

3560767

## ARTICLES OF INCORPORATION

**FILED**  
Secretary of State  
State of California

APR 30 2013



1 cc

### Article I

The name of the corporation is: Daikoku Marketing, Inc.

### Article II

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

### Article III

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is two thousand (2,000), with a one cent (\$0.01) par value per share.

### Article IV

The name in the State of California of this corporation's initial agent for service of process is:

Business Filings Incorporated

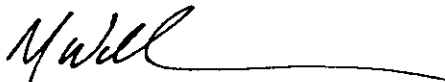
### Article V

The initial business and mailing address of the corporation is: 1930 Wilshire Blvd Suite 400, Los Angeles, California 90057

### Article VI

The liability of the directors of the corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

Business Filings Incorporated, Incorporator



BY: Mark Williams, A.V.P.





# State of California

## Secretary of State

S

### Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. **If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

G440170

FILED

In the office of the Secretary of State  
of the State of California

FEB-26 2019

### 1. CORPORATE NAME

DAIKOKU MARKETING, INC.

### 2. CALIFORNIA CORPORATE NUMBER

C3560767

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. **If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057			
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4			

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

	ADDRESS	CITY	STATE	ZIP CODE
7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146			
8. SECRETARY KEISHI IKEDA	2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146			
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146			

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

	ADDRESS	CITY	STATE	ZIP CODE
10. NAME TAKEHISA NAITO	2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146			
11. NAME				
12. NAME				

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
MARKETING

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

02/26/2019

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

BY 15 147



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

GC83845

FILED

In the office of the Secretary of State  
of the State of California

FEB-04 2020

**1. CORPORATE NAME**

DAIKOKU MARKETING, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C3560767

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

☒ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE			
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY			
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4			

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

	ADDRESS	CITY	STATE	ZIP CODE
7. CHIEF EXECUTIVE OFFICER/				
8. SECRETARY				
9. CHIEF FINANCIAL OFFICER/				

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

	ADDRESS	CITY	STATE	ZIP CODE
10. NAME				
11. NAME				
12. NAME				

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

02/04/2020

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

EX-15-148